## Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Desc Main Document Page 1 of 53

| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF ILLINOIS                   | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | Chapter 7                       |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: |   | Identify Yourself   |  |    |   |
|---------|---|---|--|----|---|
|         |   |   | About Debtor 1:                                    |    | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.      | You   | r full name   |  |    |   |
|         | your<br>pictu   | rite the name that is on<br>ur government-issued<br>cture identification (for<br>ample, your driver's | Eva<br>First name                                  | -1 | First name                                    |
|         |   | se or passport).  | Middle name  | ī  | Middle name                                   |
|         | Bring your picture identification to your meeting with the trustee. |   | Magnowski Last name and Suffix (Sr., Jr., II, III) | -  | Last name and Suffix (Sr., Jr., II, III)      |
| 2.      | used<br>Inclu   | other names you have<br>d in the last 8 years<br>ade your married or<br>den names.                    | FKA Ewa Malgrab<br>Ewa Magnowska                   |    |   |
| 3.      | youi<br>num<br>Indi   | the last 4 digits of<br>r Social Security<br>liber or federal<br>vidual Taxpayer<br>tification number | xxx-xx-9356  |    |   |

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Case number (if known)

Debtor 1 Eva Magnowski

|  |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):     I have not used any business name or EINs.  |  |  |  |  |
|--|---|---|---|--|--|--|--|
| 4.   | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years | ■ I have not used any business name or EINs.  |   |  |  |  |  |
|  | Include trade names and doing business as names   | Business name(s)  | Business name(s)  |  |  |  |  |
|  |   | EINs  | EINs  |  |  |  |  |
| 5.   | Where you live  | 4584 N. Mobile  | If Debtor 2 lives at a different address:   |  |  |  |  |
|  |   | Chicago, IL 60630<br>Number, Street, City, State & ZIP Code   | Number, Street, City, State & ZIP Code  |  |  |  |  |
|  |   | Cook  |   |  |  |  |  |
|  |   | County  | County  |  |  |  |  |
|  |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |  |  |  |  |
|  |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |  |  |  |  |
| 6. Why you are choosing this district to file for bankruptcy |   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |  |  |  |  |
|  |   |   |   |  |  |  |  |

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Document Case number (if known) Debtor 1 Eva Magnowski

| 7.  | The chapter of the  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy |                                  |                                  |  |   |  |  |  |
|-----|---|--|----------------------------------|----------------------------------|--|---|--|--|--|
|     | Bankruptcy Code you are choosing to file under  | (Form 2010)). Also, go to the top of page 1 and check the appropriate box.   |                                  |                                  |  |   |  |  |  |
|     | -   |  | hapter 7                         |                                  |  |   |  |  |  |
|     |   | □с   | hapter 11                        |                                  |  |   |  |  |  |
|     |   |  | hapter 12                        |                                  |  |   |  |  |  |
|     |   | □с   | hapter 13                        |                                  |  |   |  |  |  |
| 8.  | How you will pay the fee  |  | about how yo                     | u may pay. Ty<br>attorney is sub | pically, if you are paying the fee you   | with the clerk's office in your local court for more details<br>urself, you may pay with cash, cashier's check, or mone<br>lf, your attorney may pay with a credit card or check with |  |  |  |
|     |   |  |                                  |                                  | stallments. If you choose this option of the control of the contro | n, sign and attach the Application for Individuals to Pay   |  |  |  |
|     |   |  | I request that<br>but is not req | t my fee be w<br>uired to, waive | raived (You may request this option your fee, and may do so only if you  | only if you are filing for Chapter 7. By law, a judge may, ir income is less than 150% of the official poverty line th  |  |  |  |
|     |   |  |                                  |                                  |  | installments). If you choose this option, you must fill out al Form 103B) and file it with your petition.   |  |  |  |
| 9.  | Have you filed for bankruptcy within the  | ■ No   | ).                               |                                  |  |   |  |  |  |
|     | last 8 years?   | □Ye  | es.                              |                                  |  |   |  |  |  |
|     |   |  | District                         |                                  | When   | Case number   |  |  |  |
|     |   |  | District                         |                                  | When   | Case number   |  |  |  |
|     |   |  | District                         |                                  | When   | Case number   |  |  |  |
| 10. | Are any bankruptcy cases pending or being   | ■ No   | )                                |                                  |  |   |  |  |  |
|     | filed by a spouse who is<br>not filing this case with<br>you, or by a business<br>partner, or by an<br>affiliate? | □ Ye   | 9S.                              |                                  |  |   |  |  |  |
|     |   |  | Debtor                           |                                  |  | Relationship to you   |  |  |  |
|     |   |  | District                         |                                  | When   | Case number, if known   |  |  |  |
|     |   |  | Debtor                           |                                  |  | Relationship to you   |  |  |  |
|     |   |  | District                         |                                  | When   | Case number, if known   |  |  |  |
| 11. | Do you rent your residence?   | ■ No   | Go to I                          | ne 12.                           |  |   |  |  |  |
|     |   | □Ye  | es. Has yo                       | ur landlord obt                  | tained an eviction judgment against  | you and do you want to stay in your residence?  |  |  |  |
|     |   |  | _                                | No. Go to line                   | 12   |   |  |  |  |
|     |   |  |                                  | 110. 00 10 1110                  | 7 12.  |   |  |  |  |

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Desc Main Document Page 4 of 53 Case number (if known) Debtor 1 Eva Magnowski Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Eva Magnowski

Case number (if known)

#### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Desc Main Document Page 6 of 53 Case number (if known) Debtor 1 Eva Magnowski **Answer These Questions for Reporting Purposes** Part 6: 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Eva Magnowski Signature of Debtor 2

Executed on

MM / DD / YYYY

Eva Magnowski Signature of Debtor 1

Executed on August 4, 2016

MM / DD / YYYY

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Debtor 1 Eva Magnowski Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Michael     | J. Worwag Attorney for Debtor          | Date         | August 4, 2016     |  |  |  |  |
|-----------------|--|--------------|--------------------|--|--|--|--|
| Signature or    | Attorney for Debtor                    |              | WIWI / DD / TTTT   |  |  |  |  |
| Michael J.      | Worwag                                 |              |                    |  |  |  |  |
| Printed name    |  |              |                    |  |  |  |  |
| Worwag &        | Malysz, P.C.                           |              |                    |  |  |  |  |
| Firm name       | •                                      |              |                    |  |  |  |  |
| The People      | es Advocates                           |              |                    |  |  |  |  |
| 2500 E. De      | evon Ave #300                          |              |                    |  |  |  |  |
| Des Plaine      | s, IL 60018                            |              |                    |  |  |  |  |
| Number, Street, | Number, Street, City, State & ZIP Code |              |                    |  |  |  |  |
| Contact phone   | 847.954.2350                           | mail address | mjworwag@gmail.com |  |  |  |  |
| #6256887        |  |              |                    |  |  |  |  |
| Bar number & St | ate                                    |              |                    |  |  |  |  |

|                     |                          | 17(7(-1111)       |             |                                      |
|---------------------|--------------------------|-------------------|-------------|--------------------------------------|
| Fill in this infor  | mation to identify your  | case:             |             |                                      |
| Debtor 1            | Eva Magnowski            |                   |             |                                      |
|                     | First Name               | Middle Name       | Last Name   |                                      |
| Debtor 2            |                          |                   |             |                                      |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |                                      |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |                                      |
| Case number         |                          |                   |             |                                      |
| (if known)          |                          |                   |             | ☐ Check if this is an amended filing |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pai | t 1: Summarize Your Assets   |             |                           |
|-----|--|-------------|---------------------------|
|     |  |             | assets<br>of what you own |
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$          | 285,000.00                |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$          | 5,300.00                  |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$          | 290,300.00                |
| Par | t 2: Summarize Your Liabilities  |             |                           |
|     |  |             | iabilities<br>nt you owe  |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$          | 263,000.00                |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$          | 0.00                      |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$          | 114,905.00                |
|     | Your total liabilities   | \$          | 377,905.00                |
| Par | t 3: Summarize Your Income and Expenses  |             |                           |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$          | 3,345.00                  |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$          | 3,890.00                  |
| Par | t 4: Answer These Questions for Administrative and Statistical Records   |             |                           |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | ur other so | chedules.                 |
| 7.  | ■ Yes What kind of debt do you have?   |             |                           |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Page 9 of 53
Case number (if known) Debtor 1 Eva Magnowski

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,880.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total c | laim |
|--|---------|------|
| From Part 4 on Schedule E/F, copy the following:   |         |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 0.00 |

Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Desc Main Document Page 10 of 53 Fill in this information to identify your case and this filing: Debtor 1 Eva Magnowski First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ■ No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply 4584 N. Mobile Ave Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the 60630-0000 Chicago ☐ Land entire property? portion you own? State ZIP Code \$285,000.00 \$285,000.00 Investment property Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee Simple Debtor 1 only Cook Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$285,000.00 pages you have attached for Part 1. Write that number here......

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

Part 2: Describe Your Vehicles

☐ Yes

| D  | ebtor 1             | Eva Magnayı   | aki   | Document           | Page 11 of 53   | ımber (if known)       |  |
|----|---------------------|---|---|--------------------|---|------------------------|--|
| D  | epioi i             | Eva Magnow  | SKI   |                    |   | illibel (li kilowil) _ |  |
|    |                     |   |   |                    | cles, other vehicles, and accommobiles, motorcycle access |                        |  |
|    | ■ No                |   |   |                    |   |                        |  |
|    | ☐ Yes               |   |   |                    |   |                        |  |
|    |                     |   |   |                    |   |                        |  |
|    |                     |   |   |                    |   |                        |  |
| 5  |                     |   |   |                    | om Part 2, including any ent                              |                        | \$0.00   |
| D  | ort 21 Dog          | ariha Varr Daraa  | nal and Hawashald Hama  |                    |   |                        |  |
|    |                     |   | nal and Household Items<br>egal or equitable interest in          | any of the follow  | ring items?   |                        | Current value of the   |
|    | o , ou o            | o. navo any .   | ogar or oquitable interest in                                     | any or the rener   |   |                        | portion you own? Do not deduct secured claims or exemptions. |
| 6. |                     | old goods and f   |   |                    |   |                        |  |
|    |                     | es: Major applian   | ces, furniture, linens, china, l                                  | kitchenware        |   |                        |  |
|    | □ No                | Describe  |   |                    |   |                        |  |
|    | ■ Yes.              | Describe  |   |                    |   |                        |  |
|    |                     |   | Household Goods, Used   | d Furniture and F  | Personal Electronics                                      |                        | \$2,500.00   |
| _  |                     |   |   |                    |   |                        |  |
| 7. | Electron<br>Example | es: Televisions a   |   |                    | oment; computers, printers, sca                           | anners; music colle    | ections; electronic devices                                  |
|    | <b>=</b>            | including cell  | phones, cameras, media pla  | yers, games        |   |                        |  |
|    | ■ No                | Daniello  |   |                    |   |                        |  |
|    | ☐ Yes.              | Describe  |   |                    |   |                        |  |
| 8. | Example<br>_        | •   | figurines; paintings, prints, o<br>ons, memorabilia, collectibles |                    | oks, pictures, or other art objec                         | cts; stamp, coin, or   | r baseball card collections;                                 |
|    | ■ No<br>□ Yes.      | Describe  |   |                    |   |                        |  |
| 9. | Example             | ent for sports are<br>es: Sports, photo<br>musical instru | graphic, exercise, and other                                      | hobby equipment;   | bicycles, pool tables, golf clubs                         | s, skis; canoes and    | d kayaks; carpentry tools;                                   |
|    | ■ No                |   |   |                    |   |                        |  |
|    | ☐ Yes.              | Describe  |   |                    |   |                        |  |
| 10 | ,                   |   | s, shotguns, ammunition, and                                      | related equipmen   | t   |                        |  |
|    | ■ No                |   |   |                    |   |                        |  |
|    | ☐ Yes.              | Describe  |   |                    |   |                        |  |
| 11 |                     |   | othes, furs, leather coats, des                                   | signer wear, shoes | , accessories   |                        |  |
|    | □ No                |   |   |                    |   |                        |  |
|    | ■ Yes.              | Describe  |   |                    |   |                        |  |
|    |                     |   | Used Personal Clothing  |                    |   |                        | \$1,000.00   |
| _  |                     |   |   |                    |   |                        |  |
| 12 |                     |   | welry, costume jewelry, enga                                      | gement rings, wed  | ding rings, heirloom jewelry, w                           | atches, gems, gold     | d, silver  |
|    | □ No                | Decenii:  |   |                    |   |                        |  |
|    | ■ Yes.              | Describe  |   |                    |   |                        |  |
|    |                     |   | Costume Jewelry   |                    |   |                        | \$800.00   |

Official Form 106A/B Schedule A/B: Property

| Debto          | or 1        | Eva Magnov        | wski        | D  | ocument             | Page           | 12 01 5        | 3<br>Case number <i>(if kno</i> w | vn)        |                                      |
|----------------|-------------|-------------------|-------------|--|---------------------|----------------|----------------|-----------------------------------|------------|--------------------------------------|
| 13 <b>N</b> o  | on-fari     | m animals         |             |  |                     |                | _              |                                   |            |                                      |
| E              | xampl       | es: Dogs, cats    | , birds, ho | rses   |                     |                |                |                                   |            |                                      |
|                |             |                   |             |  |                     |                |                |                                   |            |                                      |
| Ц              | Yes. I      | Describe          |             |  |                     |                |                |                                   |            |                                      |
| _              | -           | er personal a     | nd house    | hold items you did n                           | not already list,   | including      | any health     | aids you did not list             |            |                                      |
|                |             | O' '6' . '.       |             |  |                     |                |                |                                   |            |                                      |
| Ц              | Yes. (      | Give specific in  | ntormation  | l  |                     |                |                |                                   |            |                                      |
| 15             | ما ۵ ما ۵ م | ر امر عمالمه      | of all of   | your entries from Pa                           | ut 2 inalualina     | anı antria     | - for none     | a view bevo etteched              |            |                                      |
|                |             |                   |             | here   |                     |                |                | s you have attached               |            | \$4,300.00                           |
|                |             |                   |             |  |                     |                |                |                                   |            |                                      |
| Part 4         | Des         | cribe Your Fina   | ncial Asse  | ts   |                     |                |                |                                   |            |                                      |
| Do yo          | ou owi      | n or have any     | legal or    | equitable interest in                          | any of the follo    | wing?          |                |                                   |            | urrent value of the                  |
|                |             |                   |             |  |                     |                |                |                                   | •          | ortion you own? o not deduct secured |
|                |             |                   |             |  |                     |                |                |                                   | cl         | aims or exemptions.                  |
| 16. <b>C</b> a |             |                   |             |  |                     |                |                |                                   |            |                                      |
|                |             | es: Money you     | i have in y | our wallet, in your hor                        | me, in a safe de    | posit box, a   | and on hand    | d when you file your pe           | etition    |                                      |
|                |             |                   |             |  |                     |                |                |                                   |            |                                      |
| 17 D           |             | a of manay        |             |  |                     |                |                |                                   |            |                                      |
|                |             |                   |             |  |                     |                |                | credit unions, brokerag           | ge houses, | and other similar                    |
|                | No          | institutions      | . If you ha | ave multiple accounts                          | with the same in    | stitution, lis | st each.       |                                   |            |                                      |
| _              |             |                   |             |  | Institution         | name:          |                |                                   |            |                                      |
|                |             |                   |             |  |                     |                |                |                                   |            |                                      |
|                |             |                   | 17.1.       | Checking                                       | TCF Bar             | ık             |                |                                   |            | \$500.00                             |
|                |             |                   |             |  |                     |                |                |                                   |            |                                      |
|                |             |                   | 47.0        | Pugingga abagkin                               | na TCF Bar          | nk             |                |                                   |            | \$500.00                             |
|                |             |                   | 17.2.       | Business checkin                               | ig TOI Bai          |                |                |                                   |            | ψ300.00                              |
| 40 B           | !           |                   |             | cly traded stocks                              |                     |                |                |                                   |            |                                      |
|                |             |                   |             | ent accounts with brol                         | kerage firms, mo    | oney marke     | et accounts    |                                   |            |                                      |
|                | No          |                   |             |  |                     |                |                |                                   |            |                                      |
|                | Yes         |                   |             | Institution or issuer n                        | name:               |                |                |                                   |            |                                      |
|                | -           | -                 | stock and   | interests in incorpo                           | rated and unin      | corporated     | d business     | es, including an inte             | rest in an | LLC, partnership, and                |
| jo<br>E        | oint ve     | nture             |             |  |                     |                |                |                                   |            |                                      |
|                |             | Give specific in  | nformation  | about them                                     |                     |                |                |                                   |            |                                      |
|                |             |                   |             | me of entity:                                  |                     |                |                | % of ownership:                   |            |                                      |
| 20. <b>G</b>   | overni      | ment and corp     | orate bo    | nds and other negot                            | tiable and non-     | negotiable     | instrumen      | nts                               |            |                                      |
|                |             |                   |             | personal checks, cash<br>those you cannot tran |                     |                |                |                                   |            |                                      |
|                |             | gollable Ilistiul | nems are    | those you cannot trai                          | isier to someon     | a by signing   | g or deliveri  | ing them.                         |            |                                      |
|                | Yes. C      | Sive specific int | formation   | about them                                     |                     |                |                |                                   |            |                                      |
|                |             |                   |             | uer name:                                      |                     |                |                |                                   |            |                                      |
| 21. <b>R</b> e | etirem      | ent or pensio     | n accoun    | ıts  |                     |                |                |                                   |            |                                      |
|                |             | es: Interests in  | IRA, ERI    | SA, Keogh, 401(k), 40                          | 03(b), thrift savin | igs accoun     | ts, or other p | pension or profit-shari           | ng plans   |                                      |
|                |             | iot ooob ooo=::   | int acas    | toly   |                     |                |                |                                   |            |                                      |
|                | res. L      | ist each accou    |             | of account:                                    | Institution         | name.          |                |                                   |            |                                      |

Official Form 106A/B Schedule A/B: Property page 3

|     |  |   |                | Doc 1                       |  | Entered 08/09/16 13:37:41<br>Page 13 of 53          | Desc Main   |  |  |
|-----|--|---|----------------|-----------------------------|--|---|---|--|--|
| De  | btor 1   | Eva Magnow                                      | /ski           |                             |  | Case number (if known)                              |   |  |  |
|     | <ol> <li>Security deposits and prepayments         Your share of all unused deposits you have made so that you may continue service or use from a company         Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others</li> <li>No</li> </ol> |   |                |                             |  |   |   |  |  |
|     | _  |   |                |                             | Institution na   | ame or individual:                                  |   |  |  |
|     | 3. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No   |   |                |                             |  |   |   |  |  |
|     | ☐ Yes  | IS  | suer name      | and descripti               | OII.   |   |   |  |  |
|     |  | C. §§ 530(b)(1),                                | 529A(b), an    | nd 529(b)(1).               |  | gram, or under a qualified state tuition pro        | -   |  |  |
|     | ☐ Yes  | ln  | stitution na   | me and desc                 | ription. Separately file th                            | e records of any interests.11 U.S.C. § 521(c):      |   |  |  |
|     | Trusts,<br>■ No  | equitable or fu                                 | iture intere   | sts in prope                | rty (other than anything                               | g listed in line 1), and rights or powers exer      | cisable for your benefit  |  |  |
|     | ☐ Yes.   | Give specific inf                               | formation at   | oout them                   |  |   |   |  |  |
|     |  |   |                |                             | ts, and other intellectua<br>roceeds from royalties ar | al property<br>nd licensing agreements              |   |  |  |
|     | ☐ Yes.   | Give specific inf                               | formation ab   | oout them                   |  |   |   |  |  |
|     |  | es, franchises,<br>les: Building per            |                |                             |  | holdings, liquor licenses, professional license     | es  |  |  |
|     | _  | Give specific inf                               | formation at   | oout them                   |  |   |   |  |  |
| Мо  | oney or p  | property owed                                   | to you?        |                             |  |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |  |  |
| 28. | Tax refu   | unds owed to y                                  | ou/ou          |                             |  |   |   |  |  |
|     | ■ No<br>□ Yes. 0   | Give specific info                              | ormation ab    | out them, inc               | luding whether you alrea                               | ady filed the returns and the tax years             |   |  |  |
|     | Family<br>Examp<br>■ No  |   | lump sum a     | alimony, spou               | ısal support, child suppo                              | rt, maintenance, divorce settlement, property       | settlement  |  |  |
|     | ☐ Yes. 0   | Give specific info                              | ormation       |                             |  |   |   |  |  |
|     | Examp  | mounts somed<br>les: Unpaid wag<br>benefits; un | jes, disabilit | y insurance p               | payments, disability bene<br>someone else              | efits, sick pay, vacation pay, workers' compen      | sation, Social Security   |  |  |
|     | ■ No<br>□ Yes.   | Give specific int                               | formation      |                             |  |   |   |  |  |
| 31. | _Examp   | t <b>s in insurance</b><br>les: Health, disa    |                | insurance; h                | ealth savings account (F                               | HSA); credit, homeowner's, or renter's insuran      | ce  |  |  |
|     | ■ No   | Nama tha inaura                                 |                | ny of ooob no               | liev and liet its value                                |   |   |  |  |
|     | ⊔ Yes. I   | vame the insura                                 |                | ny of each po<br>pany name: | olicy and list its value.                              | Beneficiary:  | Surrender or refund value:  |  |  |
| 32. | If you a   |   |                |                             | someone who has died<br>t proceeds from a life ins     | d surance policy, or are currently entitled to rece | ive property because  |  |  |
|     |  | Give specific int                               | formation      |                             |  |   |   |  |  |

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Case number (if known) Document Debtor 1 Eva Magnowski 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,000.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$285,000.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$4,300.00 58. Part 4: Total financial assets, line 36 \$1,000.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

62. **Total personal property.** Add lines 56 through 61... \$5,300.00 Copy personal property total \$5,300.00 63. **Total of all property on Schedule A/B**. Add line 55 + line 62 \$290,300.00

\$0.00

Official Form 106A/B Schedule A/B: Property page 5

61. Part 7: Total other property not listed, line 54

| Fill in this infor              | mation to identify your  | case:             |           |  |
|---------------------------------|--------------------------|-------------------|-----------|--|
| Debtor 1                        | Eva Magnowski            | Middle Name       | Last Name |  |
| Debtor 2<br>(Spouse if, filing) | First Name               | Middle Name       | Last Name |  |
|                                 | ankruptcy Court for the: | NORTHERN DISTRICT |           |  |
| Case number                     |                          |                   |           |  |
| (if known)                      |                          |                   |           |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property |                                     |      | Specific laws that allow exemption                              |                       |
|--|-------------------------------------|------|---|-----------------------|
|  | Copy the value from<br>Schedule A/B | Chec | ck only one box for each exemption.                             |                       |
| 4584 N. Mobile Ave Chicago, IL 60630<br>Cook County                                    | \$285,000.00                        |      | \$15,000.00   | 735 ILCS 5/12-901     |
| Line from Schedule A/B: 1.1  |                                     |      | 100% of fair market value, up to any applicable statutory limit |                       |
| Household Goods, Used Furniture and Personal Electronics                               | \$2,500.00                          |      | \$2,200.00  | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B</i> : 6.1  |                                     |      | 100% of fair market value, up to any applicable statutory limit |                       |
| Used Personal Clothing Line from Schedule A/B: 11.1                                    | \$1,000.00                          |      | \$1.00  | 735 ILCS 5/12-1001(a) |
| Ellio Holli Goreadie 772. TT.1   |                                     |      | 100% of fair market value, up to any applicable statutory limit |                       |
| Costume Jewelry Line from Schedule A/B: 12.1   | \$800.00                            |      | \$800.00  | 735 ILCS 5/12-1001(b) |
| Ellie Holli Goricadie A/B. 12.1  |                                     |      | 100% of fair market value, up to any applicable statutory limit |                       |
| Checking: TCF Bank Line from Schedule A/B: 17.1  | \$500.00                            |      | \$500.00  | 735 ILCS 5/12-1001(b) |
| Line from Schedule AVB. 17.1   |                                     |      | 100% of fair market value, up to any applicable statutory limit |                       |

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Eva Magnowski

Brief description of the property and line on Schedule A/B that lists this property

Current value of the Property and line on Schedule A/B that lists this property

Current value of the Property and line on Schedule A/B that lists this property

| JEI | DIOI I EVA IVIAGITOWSKI   |                                      | Case number (ii known   | )                                  |
|-----|---|--------------------------------------|---|------------------------------------|
|     | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|     |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.                          |                                    |
|     | Business checking: TCF Bank Line from Schedule A/B: 17.2                            | \$500.00                             | \$500.00  | 735 ILCS 5/12-1001(b)              |
|     | Line Holli Schedule Arb. 17.2   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |

| 3. | Are you claiming | a homestead | exemption of | more than | \$160,375? |
|----|------------------|-------------|--------------|-----------|------------|
|    |                  |             |              |           |            |

| (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustmen | ( | Subje | ect to ad | justment o | n 4/01/19 and | every 3 | years after | that for | cases filed | on or afte | er the date | e of adjustme | nt. |
|--|---|-------|-----------|------------|---------------|---------|-------------|----------|-------------|------------|-------------|---------------|-----|
|--|---|-------|-----------|------------|---------------|---------|-------------|----------|-------------|------------|-------------|---------------|-----|

■ No

|  | Yes. Did vo | ou acquire the | property covered by | the exemption within 1 | .215 days before | vou filed this case? |
|--|-------------|----------------|---------------------|------------------------|------------------|----------------------|
|--|-------------|----------------|---------------------|------------------------|------------------|----------------------|

☐ No

☐ Yes

| Cas                                     | se 10-25532                 | Document Document  | Page 17         | u uo/u9/10 13.3   | 37.41 Desc N                                 | iaiii                    |
|---|-----------------------------|--|-----------------|---|--|--------------------------|
| Fill in this inform                     | ation to identify you       |  | Paue 17         | UL DA   |  |                          |
|   | ation to identity you       | ii case.   |                 |   |  |                          |
| Debtor 1                                | Eva Magnowski<br>First Name | Middle Name  | Last Nama       |   |  |                          |
| Debtor 2                                | First Name                  | Middle Name  | Last Name       |   |  |                          |
| (Spouse if, filing)                     | First Name                  | Middle Name  | Last Name       |   |  |                          |
| United States Ban                       | kruptcy Court for the:      | NORTHERN DISTRICT OF ILL   | INOIS           |   |  |                          |
| Cana awah an                            |                             |  |                 |   |  |                          |
| Case number                             |                             |  |                 |   | □ Check                                      | if this is an            |
|   |                             |  |                 |   |  | led filing               |
| Official Form                           | 106D                        |  |                 |   |  |                          |
| Schedule I                              | D: Creditors                | Who Have Claims  | Secure          | d by Property   | 1  | 12/15                    |
|   |                             | If two married people are filing togetheout, number the entries, and attach it t             |                 |   |  |                          |
| ,                                       | nave claims secured by      | v vour property?   |                 |   |  |                          |
|   | •                           | his form to the court with your other  | echadulas V     | ou have nothing else to                                 | report on this form                          |                          |
| _                                       |                             | ·  | scriedules. T   | ou have nothing else to                                 | report on this form.                         |                          |
| ■ Yes. Fill in                          | all of the information      | below.   |                 |   |  |                          |
| Part 1: List All                        | Secured Claims              |  |                 |   |  |                          |
|   |                             | more than one secured claim, list the cred   |                 |   | Column B                                     | Column C                 |
|   |                             | s a particular claim, list the other creditors<br>cal order according to the creditor's name |                 | Amount of claim  Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 JPMorgan                            | Chase Bank NA               | Describe the property that secures t   | he claim:       | \$263,000.00  | \$285,000.00                                 | \$0.00                   |
| Creditor's Name                         |                             | 4584 N. Mobile Ave Chicago, I<br>Cook County   | L 60630         |   |  |                          |
| PO Box 299                              |                             | As of the date you file, the claim is: (apply.   | Check all that  |   |  |                          |
| Phoenix, A                              |                             | ☐ Contingent   |                 |   |  |                          |
| Number, Street,                         | City, State & Zip Code      | Unliquidated   |                 |   |  |                          |
| Who owes the deb                        | ot? Check one               | ☐ Disputed  Nature of lien. Check all that apply.  |                 |   |  |                          |
| ■ Debtor 1 only                         | one on one                  | ☐ An agreement you made (such as n   | nortgage or sec | cured   |  |                          |
| Debtor 2 only                           |                             | car loan)  |                 |   |  |                          |
| Debtor 1 and Det                        | otor 2 only                 | ☐ Statutory lien (such as tax lien, med  | chanic's lien)  |   |  |                          |
| _                                       | e debtors and another       | ☐ Judgment lien from a lawsuit   |                 |   |  |                          |
| ☐ Check if this cla                     |                             | Other (including a right to offset)  |                 |   |  |                          |
| Date debt was incu                      | rred                        | _ Last 4 digits of account numb  | oer             |   |  |                          |
|   |                             |  |                 |   |  |                          |
|   | •                           | olumn A on this page. Write that numb  | per here:       | \$263,000   | 0.00   |                          |
| If this is the last p Write that number |                             | the dollar value totals from all pages.  |                 | \$263,000   | 0.00   |                          |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

|  |   | Document   | Page 1   | 8 of 53   |   |
|--|---|--|--|---|---|
| Fill in thi  | s information to identify your  | case:  |  |   |   |
| Debtor 1   | Eva Magnowski   |  |  |   |   |
|  | First Name  | Middle Name  | Last Name  |   |   |
| Debtor 2<br>(Spouse if, f                              | iling) First Name   | Middle Name  | Last Name  |   |   |
|  |   | NORTHERN DISTRICT OF ILI   | INOIS  |   |   |
| United Si  | ates Bankruptcy Court for the:  | NORTHERN DISTRICT OF ILI   | LINOIS   |   |   |
| Case nur   | mber  |  |  |   | ☐ Check if this is an   |
|  |   |  |  |   | amended filing  |
|  | Form 106E/F<br>  ule E/F: Creditors W   | /ho Have Unsecured   | Claims   |   | 12/15   |
| any execut<br>Schedule (<br>Schedule I<br>left. Attach | ory contracts or unexpired leases<br>3: Executory Contracts and Unexp<br>D: Creditors Who Have Claims Sec<br>the Continuation Page to this pag<br>case number (if known). | that could result in a claim. Also living the state of th | ist executory o<br>o not include<br>needed, copy t | Part 2 for creditors with NONPRIORIT<br>contracts on Schedule A/B: Property<br>any creditors with partially secured ¢<br>the Part you need, fill it out, number<br>do not file that Part. On the top of any | (Official Form 106A/B) and on<br>claims that are listed in<br>the entries in the boxes on the |
| Part 1:  | List All of Your PRIORITY Un  |  |  |   |   |
| _  | y creditors have priority unsecure  | d claims against you?  |  |   |   |
|  | o. Go to Part 2.  |  |  |   |   |
| ☐ Ye   | •   | TV I Image assume al Clatima   |  |   |   |
| Part 2:  | List All of Your NONPRIORIT   |  |  |   |   |
| _  | y creditors have nonpriority unsec  |  |  |   |   |
|  |   | eart. Submit this form to the court with   | your other sche                                    | edules.   |   |
| Ye   | S.  |  |  |   |   |
| unsec  | ured claim, list the creditor separately<br>one creditor holds a particular claim, I  | y for each claim. For each claim listed  | l, identify what t                                 | holds each claim. If a creditor has mype of claim it is. Do not list claims alresthree nonpriority unsecured claims fill of   | ady included in Part 1. If more   |
|  |   |  |  |   | Total claim   |
|  | Amex  | Last 4 digits of acc   | ount number  | 4893  | \$9,879.00  |
| F  | Ionpriority Creditor's Name<br>Po Box 297871<br>Fort Lauderdale, FL 33329   | When was the debt  | incurred?  | Opened 4/13/95  |   |
| N  | Iumber Street City State Zlp Code  Vho incurred the debt? Check one.  | As of the date you   | file, the claim i                                  | s: Check all that apply   |   |
|  | Debtor 1 only   | ☐ Contingent   |  |   |   |
|  | Debtor 2 only   | ☐ Unliquidated   |  |   |   |
|  | Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |   |   |
|  | At least one of the debtors and and   | other Type of NONPRIOR   | RITY unsecured                                     | d claim:  |   |
|  | Check if this claim is for a comi   | munity   |  |   |   |
|  | ebt<br>s the claim subject to offset?   | Obligations arising report as priority clain   |  | ration agreement or divorce that you di   | d not   |
| _  | No  | <u>'</u> ' '   |  | g plans, and other similar debts  |   |
|  | ■ No<br>□ Yes   | Other. Specify   | •  | 3 F 31111101 00010  |   |
| _  |   | Other. Specify _   | C. Cart Card                                       |   |   |

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| Debioi | Eva Magnowski   | Case number (if know)   |            |
|--------|---|---|------------|
| 4.2    | Amex  | Last 4 digits of account number 8243  | \$6,161.00 |
|        | Nonpriority Creditor's Name Po Box 297871   | When was the debt incurred? Opened 2/25/95  |            |
|        | Fort Lauderdale, FL 33329  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |            |
|        | Debtor 1 only   | ☐ Contingent  |            |
|        | ☐ Debtor 2 only   | ☐ Unliquidated  |            |
|        | Debtor 1 and Debtor 2 only  | □ Disputed  |            |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|        | ☐ Check if this claim is for a community  | ☐ Student loans   |            |
|        | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|        | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |
|        | Yes   | Other. Specify Credit Card  |            |
| 4.3    | Amex  | Last 4 digits of account number 9830  | \$4,039.00 |
|        | Nonpriority Creditor's Name<br>9111 Duke Blvd   | When was the debt incurred? Opened 5/18/13  |            |
|        | Mason, OH 45040  Number Street City State Zlp Code  Who incurred the debt? Check one.           | As of the date you file, the claim is: Check all that apply   |            |
|        | ■ Debtor 1 only   | ☐ Contingent  |            |
|        | Debtor 2 only   | ☐ Unliquidated  |            |
|        | ☐ Debtor 1 and Debtor 2 only  | □ Disputed  |            |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|        | ☐ Check if this claim is for a community  | ☐ Student loans   |            |
|        | debt<br>Is the claim subject to offset?   | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims  |            |
|        | No  | lacksquare Debts to pension or profit-sharing plans, and other similar debts                              |            |
|        | Yes   | ■ Other. Specify Credit Card  |            |
| 4.4    | Chase Card  | Last 4 digits of account number 4299  | \$7,226.00 |
|        | Nonpriority Creditor's Name<br>Po Box 15298<br>Wilmington, DE 19850                             | When was the debt incurred? Opened 10/26/08   |            |
|        | Number Street City State Zlp Code  Who incurred the debt? Check one.                            | As of the date you file, the claim is: Check all that apply   |            |
|        | ■ Debtor 1 only   | ☐ Contingent  |            |
|        | Debtor 2 only   | ☐ Unliquidated  |            |
|        | ☐ Debtor 1 and Debtor 2 only  | □ Disputed  |            |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |
|        | ☐ Check if this claim is for a community  | ☐ Student loans   |            |
|        | debt  | ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |
|        | Is the claim subject to offset?   | report as priority claims   |            |
|        | ■ No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
|        | Yes   | ■ Other. Specify Credit Card  |            |

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| Debioi | Eva Magnowski   |  | Case number (if know)                         |            |
|--------|---|--|---|------------|
| 4.5    | Chase Card  | Last 4 digits of account number                            | 2366  | \$3,779.00 |
|        | Nonpriority Creditor's Name<br>Po Box 15298   | When was the debt incurred?                                | Opened 11/01/92                               |            |
|        | Wilmington, DE 19850  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim                         | is: Check all that apply                      |            |
|        | Debtor 1 only   | Пол  |   |            |
|        |   | ☐ Contingent   |   |            |
|        | Debtor 2 only   | ☐ Unliquidated   |   |            |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecure                   | d claim:                                      |            |
|        | At least one of the debtors and another   | Student loans  | u Ciaiiii.                                    |            |
|        | Check if this claim is for a community debt   | ☐ Obligations arising out of a sepa                        | aration agreement or divorce that you did not |            |
|        | Is the claim subject to offset?   | report as priority claims                                  |   |            |
|        | No  | ☐ Debts to pension or profit-sharing                       | •   |            |
|        | Yes   | Other. Specify Credit Card                                 |   |            |
| 4.6    | Citibank Nonpriority Creditor's Name  | Last 4 digits of account number                            | 0876  | \$3,897.00 |
|        | Po Box 6241   | When was the debt incurred?                                | Opened 9/24/15                                |            |
|        | Sioux Falls, SD 57117  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |            |
|        | ■ Debtor 1 only   | ☐ Contingent   |   |            |
|        | Debtor 2 only   | ☐ Unliquidated   |   |            |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |
|        | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |            |
|        | ☐ Check if this claim is for a community  | ☐ Student loans  |   |            |
|        | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
|        | ■ No  | Debts to pension or profit-sharing                         | ng plans, and other similar debts             |            |
|        | Yes   | Other. Specify Credit Card                                 |   |            |
| 4.7    | Citibank  | Last 4 digits of account number                            | 0421  | \$3,015.00 |
|        | Nonpriority Creditor's Name Po Box 6241   | When was the debt incurred?                                | Opened 8/17/09                                |            |
|        | Sioux Falls, SD 57117  Number Street City State Zlp Code                                    | As of the date you file, the claim                         | is: Check all that apply                      |            |
|        | Who incurred the debt? Check one.   |  |   |            |
|        | Debtor 1 only   | Contingent   |   |            |
|        | Debtor 2 only   | Unliquidated   |   |            |
|        | Debtor 1 and Debtor 2 only  | ☐ Disputed   | Later.  |            |
|        | At least one of the debtors and another   | Type of NONPRIORITY unsecure                               | d claim:                                      |            |
|        | ☐ Check if this claim is for a community debt   | ☐ Student loans  |   |            |
|        | Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
|        | ■ No  | Debts to pension or profit-sharir                          | ng plans, and other similar debts             |            |
|        | ☐ Yes   | ■ Other. Specify Credit Card                               | •   |            |
|        |   |  |   |            |

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| Depto | r 1 Eva Magnowski   |  | Case number (if know)                         |             |  |  |  |  |  |
|-------|---|--|---|-------------|--|--|--|--|--|
| 4.8   | Commerce Bank   | Last 4 digits of account number                            | 1977  | \$9,454.00  |  |  |  |  |  |
|       | Nonpriority Creditor's Name Po Box 411036   | When was the debt incurred?                                | Opened 1/24/08                                |             |  |  |  |  |  |
|       | Kansas City, MO 64141  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | is: Check all that apply                      |             |  |  |  |  |  |
|       | _   |  |   |             |  |  |  |  |  |
|       | Debtor 2 only   | ■ Debtor 1 only □ Contingent                               |   |             |  |  |  |  |  |
|       |   | ☐ Unliquidated   |   |             |  |  |  |  |  |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed  Type of NONPRIORITY unsecure                   | d claim:                                      |             |  |  |  |  |  |
|       | At least one of the debtors and another   | Student loans  | d Gain.                                       |             |  |  |  |  |  |
|       | ☐ Check if this claim is for a community debt Is the claim subject to offset?               |  | aration agreement or divorce that you did not |             |  |  |  |  |  |
|       | No  | Debts to pension or profit-sharir                          | ng plans, and other similar debts             |             |  |  |  |  |  |
|       | Yes   | Other. Specify Credit Card                                 |   |             |  |  |  |  |  |
| 4.9   | Discover Financial Nonpriority Creditor's Name  | Last 4 digits of account number                            | 6425  | \$4,838.00  |  |  |  |  |  |
|       | Po Box 15316 Wilmington, DE 19850   | When was the debt incurred?                                | Opened 8/23/02                                |             |  |  |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.                        | As of the date you file, the claim                         | is: Check all that apply                      |             |  |  |  |  |  |
|       | Debtor 1 only   | ☐ Contingent   |   |             |  |  |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated   |   |             |  |  |  |  |  |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |             |  |  |  |  |  |
|       | ☐ At least one of the debtors and another   |  |   |             |  |  |  |  |  |
|       | ☐ Check if this claim is for a community  | ☐ Student loans  |   |             |  |  |  |  |  |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims |   |             |  |  |  |  |  |
|       | ■ No  | Debts to pension or profit-sharing                         |   |             |  |  |  |  |  |
|       | Yes   | Other. Specify Credit Card                                 |   |             |  |  |  |  |  |
| 4.1   | Fed Loan Services   | Last 4 digits of account number                            | 0002  | \$22,836.00 |  |  |  |  |  |
|       | Nonpriority Creditor's Name<br>Po Box 60610   | When was the debt incurred?                                | Opened 8/16/15                                |             |  |  |  |  |  |
|       | Harrisburg, PA 17106  Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim                         | is: Check all that apply                      |             |  |  |  |  |  |
|       | ■ Debtor 1 only   | ☐ Contingent   |   |             |  |  |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated   |   |             |  |  |  |  |  |
|       | Debtor 1 and Debtor 2 only  | □ Disputed   |   |             |  |  |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecure                               |   |             |  |  |  |  |  |
|       | ☐ Check if this claim is for a community  | eck if this claim is for a community                       |   |             |  |  |  |  |  |
|       | debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims |   |             |  |  |  |  |  |
|       | ■ No  | Debts to pension or profit-sharing                         |   |             |  |  |  |  |  |
|       | ☐ Yes   | ■ Other. Specify Student loa                               | n   |             |  |  |  |  |  |

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| Debt     | or 1 Eva Magnowski                                      |  | Case number (if know)                        |                |  |  |
|----------|---|--|--|----------------|--|--|
| 4.1<br>1 | Fed Loan Services                                       | Last 4 digits of account number  | 0001   | \$18,510.00    |  |  |
|          | Nonpriority Creditor's Name Po Box 60610                | When was the debt incurred?  | Opened 8/17/14                               |                |  |  |
|          | Harrisburg, PA 17106  Number Street City State Zlp Code | As of the date you file, the claim   | s. Check all that apply                      |                |  |  |
|          | Who incurred the debt? Check one.                       | As of the date you me, the dam's   | S. Oncok all that apply                      |                |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent   |  |                |  |  |
|          | ☐ Debtor 2 only   | ☐ Unliquidated   |  |                |  |  |
|          | Debtor 1 and Debtor 2 only                              | ☐ Disputed   |  |                |  |  |
|          | ☐ At least one of the debtors and another               | Type of NONPRIORITY unsecured  | d claim:                                     |                |  |  |
|          | ☐ Check if this claim is for a community                | ☐ Student loans  |  |                |  |  |
|          | debt Is the claim subject to offset?                    | Obligations arising out of a separeport as priority claims                                     | ration agreement or divorce that you did not |                |  |  |
|          | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |                |  |  |
|          | Yes   | Other. Specify Student loan  | 1  |                |  |  |
| 4.1<br>2 | Macy dsnb   | Last 4 digits of account number  | 0080   | \$298.00       |  |  |
|          | Nonpriority Creditor's Name                             |  |  | <u> </u>       |  |  |
|          | 9111 Duke Blvd  | When was the debt incurred?  | Opened 5/18/13                               |                |  |  |
|          | Mason, OH 45040  Number Street City State Zlp Code      | As of the date you file, the claim   | s: Check all that apply                      |                |  |  |
|          | Who incurred the debt? Check one.                       | •  |  |                |  |  |
|          | Debtor 1 only   | ☐ Contingent   |  |                |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |  |                |  |  |
|          | Debtor 1 and Debtor 2 only                              | ☐ Disputed   |  |                |  |  |
|          | ☐ At least one of the debtors and another               | Type of NONPRIORITY unsecured  | d claim:                                     |                |  |  |
|          | ☐ Check if this claim is for a community                | ☐ Student loans  |  |                |  |  |
|          | debt Is the claim subject to offset?                    | Obligations arising out of a separeport as priority claims                                     |  |                |  |  |
|          | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts             |                |  |  |
|          | ☐ Yes   | ■ Other. Specify Charge Acc  | ount   |                |  |  |
| 4.1<br>3 | Nordstrom   | Last 4 digits of account number  | 6588   | \$12,236.00    |  |  |
| <u> </u> | Nonpriority Creditor's Name                             |  |  | <del>, ,</del> |  |  |
|          | 13531 E Caley Ave                                       | When was the debt incurred?  | Opened 12/13/06                              |                |  |  |
|          | Englewood, CO 80111  Number Street City State Zlp Code  | As of the date you file, the claim   | s: Check all that apply                      |                |  |  |
|          | Who incurred the debt? Check one.                       | 7.5 or and date <b>,</b> on me, and elamin   | C. C     |                |  |  |
|          | ■ Debtor 1 only   | ☐ Contingent   |  |                |  |  |
|          | Debtor 2 only   | ☐ Unliquidated   |  |                |  |  |
|          | ☐ Debtor 1 and Debtor 2 only                            |  |  |                |  |  |
|          | ☐ At least one of the debtors and another               |  |  |                |  |  |
|          | ☐ Check if this claim is for a community                | Charles to an  |  |                |  |  |
|          | debt  | Obligations arising out of a sepa  |  |                |  |  |
|          | Is the claim subject to offset?                         | report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts |  |                |  |  |
|          | ■ No  |  | g plans, and other similar debts             |                |  |  |
|          | □ Yes   | Other. Specify Credit Card   |  |                |  |  |

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| Eva Magnowski   |  | Case number (if know)                        |           |
|---|--|--|-----------|
| Syncb/Gapdc   | Last 4 digits of account number                            | 5211   | \$3,728.0 |
| Nonpriority Creditor's Name<br>Po Box 965005<br>Orlando, FL 32896                     | When was the debt incurred?                                | Opened 5/18/11                               |           |
| Number Street City State Zlp Code  Who incurred the debt? Check one.                  | As of the date you file, the claim                         | s: Check all that apply                      |           |
| ■ Debtor 1 only   | ☐ Contingent   |  |           |
| Debtor 2 only   | ☐ Unliquidated   |  |           |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |           |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                              | d claim:                                     |           |
| ☐ Check if this claim is for a community  | ☐ Student loans  |  |           |
| debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |           |
| ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts             |           |
| Yes   | Other. Specify Credit Card                                 |  |           |
| Syncb/Toysrusdc   | Last 4 digits of account number                            | 0088   | \$865.0   |
| Nonpriority Creditor's Name Po Box 965005 Orlando, FL 32896                           | When was the debt incurred?                                | Opened 5/07/14                               |           |
| Number Street City State Zlp Code  Who incurred the debt? Check one.                  | As of the date you file, the claim                         | s: Check all that apply                      |           |
| ■ Debtor 1 only   | ☐ Contingent   |  |           |
| Debtor 2 only   | ☐ Unliquidated   |  |           |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |           |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                              | d claim:                                     |           |
| ☐ Check if this claim is for a community  | ☐ Student loans  |  |           |
| debt<br>Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |           |
| ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts             |           |
| Yes   | Other. Specify Credit Card                                 |  |           |
| Us Bank   | Last 4 digits of account number                            | 9164   | \$4,144.0 |
| Nonpriority Creditor's Name<br>4325 17th Ave S  | When was the debt incurred?                                | Opened 7/01/09                               |           |
| Fargo, ND 58125  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                         | s: Check all that apply                      |           |
| ■ Debtor 1 only   | ☐ Contingent   |  |           |
| □ Debtor 2 only   | ☐ Unliquidated   |  |           |
| Debtor 1 and Debtor 2 only  | ☐ Disputed   |  |           |
| ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured                              | d claim:                                     |           |
| ☐ Check if this claim is for a community  | ☐ Student loans  |  |           |
| debt<br>Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |           |
| ■ No  | Debts to pension or profit-sharing                         | g plans, and other similar debts             |           |
| ☐ Yes   | ■ Other. Specify Credit Card                               |  |           |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Eva Magnowski

Case 16-25532

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     |             | Total Claim      |
|-----------------------|-----|---|-----|-------------|------------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$          | 0.00             |
| Total                 |     |   |     |             |                  |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$          | 0.00             |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00             |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$          | 0.00             |
|                       |     | ,   |     | Ψ           | 0.00             |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | •           | 0.00             |
|                       | 06. | Total Friority. Add lines of through od.  | oe. | \$          | 0.00             |
|                       |     |   |     |             | Total Claim      |
|                       | 6f. | Student loans   | 6f. | \$          | Total Claim 0.00 |
| Total                 |     |   |     | Ψ           | 0.00             |
| claims                |     |   |     |             |                  |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00             |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00             |
|                       | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount                                    | 6i. |             | 114,905.00       |
|                       |     | here.   |     | \$          | 117,303.00       |
|                       | e;  | Total Nappriarity Add lines of through 6  | e:  | \$          | 444.005.00       |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | <b>a</b> —— | 114,905.00       |
|                       |     |   |     | -           |                  |

|                     |                          | 1717111           |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this infor  | mation to identify your  | case:             |             |  |
| Debtor 1            | Eva Magnowski            | Middle Name       | Last Name   |  |
| Debtor 2            |                          |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | h whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 |           |              |                       |                   |   |
|     | Name      |              |                       |                   | <del>_</del>                            |
|     | Name      |              |                       |                   |   |
|     |           |              |                       |                   |   |
|     | Number    | Street       |                       |                   |   |
|     |           |              |                       |                   |   |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.2 | •         |              |                       |                   |   |
|     | Name      |              |                       |                   | _                                       |
|     | Name      |              |                       |                   |   |
|     |           |              |                       |                   |   |
|     | Number    | Street       |                       |                   | _                                       |
|     |           |              |                       |                   |   |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.3 | /         |              |                       |                   |   |
| 2.0 | Name      |              |                       |                   | _                                       |
|     | Name      |              |                       |                   |   |
|     |           |              |                       |                   |   |
|     | Number    | Street       |                       |                   | _                                       |
|     |           |              |                       |                   |   |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.4 | Oity      |              | Ciaio                 | 211 0000          |   |
| 2.4 |           |              |                       |                   | _                                       |
|     | Name      |              |                       |                   |   |
|     |           |              |                       |                   |   |
|     | Number    | Street       |                       |                   | _                                       |
|     | Number    | Olicot       |                       |                   |   |
|     | City      |              | State                 | ZIP Code          | _                                       |
| 2.5 | City      |              | State                 | ZIF Code          |   |
| 2.5 |           |              |                       |                   | _                                       |
|     | Name      |              |                       |                   |   |
|     |           |              |                       |                   |   |
|     | Number    | Street       |                       |                   | _                                       |
|     | MUITIDE   | Olleet       |                       |                   |   |
|     | City      |              | Ctata                 | 7ID Code          | _                                       |
|     | City      |              | State                 | ZIP Code          |   |

|                                |   | Docume   | ent Page 26 d  | DT 53   |  |
|--------------------------------|---|--|--|---|--|
| Fill in this i                 | information to identify your  |  |  |   |  |
| Debtor 1                       | Eva Magnowski   |  |  |   |  |
|                                | First Name  | Middle Name  | Last Name  |   |  |
| Debtor 2<br>(Spouse if, filing | g) First Name   | Middle Name  | Last Name  |   |  |
| United State                   | es Bankruptcy Court for the:  | NORTHERN DISTRICT  | OF ILLINOIS  |   |  |
| Ormed Oldi                     | os Barintapioy Court for the.   | TOTAL PROTEIN  | 0. 122   |   |  |
| Case numb                      |   |  |  |   | ☐ Check if this is an  |
|                                |   |  |  |   | amended filing   |
| Official                       | Form 10011  |  |  |   |  |
|                                | Form 106H   | -1-1   |  |   |  |
| Sched                          | ule H: Your Cod   | ebtors   |  |   | 12/15  |
| ■ No □ Yes  2. With Arizona    | nin the last 8 years, have you<br>a, California, Idaho, Louisiana,<br>Go to line 3.<br>Did your spouse, former spor | ı <b>lived in a community pr</b><br>, Nevada, New Mexico, Pu | roperty state or territor<br>lerto Rico, Texas, Wash | ry? (Community property                             | states and territories include   |
| in line<br>Form 1<br>out Co    | 2 again as a codebtor only i  | f that person is a guaran                                    | tor or cosigner. Make                                | sure you have listed the<br>06G). Use Schedule D, S | with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill litor to whom you owe the debt |
|                                | lame, Number, Street, City, State and Zi  | P Code   |  | Check all schedules                                 |  |
| 3.1                            |   |  |  | ☐ Schedule D, line                                  |  |
|                                | Name  |  |  | ☐ Schedule E/F, lin                                 | <br>ne   |
|                                |   |  |  | ☐ Schedule G, line                                  |  |
|                                | Number Street   |  |  | <u> </u>  |  |
| C                              | City  | State  | ZIP Code   |   |  |
|                                |   |  |  | O objected D. Park                                  |  |
| 3.2                            | Name  |  |  | _ ☐ Schedule D, line ☐ Schedule E/F, lin            |  |
|                                |   |  |  | ☐ Schedule G, line                                  |  |
| <u> </u>                       | Number Street   |  |  | _   |  |
|                                | Dity  | State  | ZIP Code   |   |  |

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| Fill               | in this information to   | identify your ca                | ase:  |   |                  |                |                      |                         |                           |                              |                 |
|--------------------|--|---------------------------------|---|---|------------------|----------------|----------------------|-------------------------|---------------------------|------------------------------|-----------------|
| Del                | btor 1   | Eva Magnow                      | ski   |   |                  |                |                      |                         |                           |                              |                 |
|                    | btor 2<br>buse, if filing)   |                                 |   |   |                  |                |                      |                         |                           |                              |                 |
| Uni                | ited States Bankrupto  | cy Court for the                | NORTHERN DISTRIC  | CT OF ILLINOIS                                      |                  |                |                      |                         |                           |                              |                 |
| _                  | se number<br>nown)   |                                 |   | -   |                  |                | □ A                  |                         | ed filing<br>ent showing  | g postpetition               | •               |
| O                  | fficial Form   | 1061                            |   |   |                  |                | _                    | /M / DD/ Y              |                           | menning date.                |                 |
|                    | chedule I: Y   |                                 | ome   |   |                  |                | IV                   | ז /טט / זוויו           | 111                       |                              | 12/1            |
| sup<br>spo<br>atta | plying correct infor<br>buse. If you are sepa<br>ch a separate sheet | mation. If you rated and you    | sible. If two married peo<br>are married and not filii<br>r spouse is not filing wi<br>On the top of any additi | ng jointly, and your<br>ith you, do not incl        | spouse ude infor | is liv<br>mati | ring with<br>on abou | you, incl<br>t your spo | ude inforn<br>ouse. If mo | nation about<br>ore space is | your<br>needed, |
| 1.                 | Fill in your employ information.                                     | yment                           |   | Debtor 1  |                  |                |                      | Debtor 2                | 2 or non-fil              | ling spouse                  |                 |
|                    | If you have more the attach a separate p                             | ate page with Employment status |   | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |                  |                |                      | ☐ Emple                 | •                         |                              |                 |
|                    | information about a<br>employers.                                    | additional                      | Occupation  | Dental Technici                                     | an               |                |                      |                         | , ,                       |                              |                 |
|                    | Include part-time, s<br>self-employed work                           |                                 | Employer's name   | First Impression                                    |                  | l Lat          | )                    |                         |                           |                              |                 |
|                    | Occupation may in<br>or homemaker, if it                             |                                 | Employer's address  | 931 W. Wise Ro<br>Schaumburg, IL                    |                  |                |                      |                         |                           |                              |                 |
|                    |  |                                 | How long employed t   | here? 13 yea  | rs               |                |                      | _                       |                           |                              |                 |
| Pai                | rt 2: Give Deta  | ils About Mon                   | thly Income   |   |                  |                |                      |                         |                           |                              |                 |
|                    | imate monthly incoruse unless you are se                             |                                 | ate you file this form. If  | you have nothing to                                 | report for       | any            | line, write          | ∍ \$0 in the            | space. Inc                | clude your nor               | n-filing        |
|                    | ou or your non-filing s<br>e space, attach a ser                     |                                 | ore than one employer, co   | ombine the information                              | on for all       | empl           | oyers for            | that perso              | on on the lir             | nes below. If y              | you need        |
|                    |  |                                 |   |   |                  |                | For Del              | otor 1                  |                           | otor 2 or<br>ng spouse       |                 |
| 2.                 |  |                                 | ry, and commissions (b<br>calculate what the monthl   |   | 2.               | \$             | 4                    | ,330.00                 | \$                        | N/A                          |                 |
| 3.                 | Estimate and list  | monthly overti                  | me pay.   |   | 3.               | +\$            |                      | 0.00                    | +\$                       | N/A                          |                 |
| 4.                 | Calculate gross Ir   | ncome. Add lin                  | ne 2 + line 3.  |   | 4.               | \$             | 4,3                  | 30.00                   | \$                        | N/A                          |                 |

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| 5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5d. Required repayments of retirement fund loans 5d. No. Onc. S. N. N. S. Onc. S. N. N. Retirement fund property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8d. Interest and dividends 8b. S. Onc. S. N. S.  | Debtor 1         | Eva Magnowski  |        | Cas  | e number (if kr | nown) |                |      |      |  |
|--|------------------|--|--------|------|-----------------|-------|----------------|------|------|--|
| 5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for settlement fund loans 5c. Voluntary fund fund fund fund fund fund fund fund  |                  |  |        |      |                 |       |                |      |      |  |
| 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for settlement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. S. 0.00 \$ N.V. 5d. Inion dues 5d. S. 0.00 \$ N.V. 5d. Union dues 5d. S. 0.000 \$ N.V. 5d. Voluntary contributions for mental property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8d. Interest and dividends 8b. S. 0.000 \$ N.V. 8d. Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8d. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as Good stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8d. On the monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular co  | Co               | ppy line 4 here  | 4.     | \$   | 4,330           | 0.00  | \$             |      | N/A  | _  |
| 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.000 S NV 5d. Required repayments of retirement fund loans 5d. \$ 0.000 S NV 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.000 S NV 5g. Union dues 5f. Domestic support obligations 5f. \$ 0.000 S NV 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 + S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,345.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,345.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,345.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 S NV 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 9.000 S NV 6. Add the payroll deductions. Add lines 6a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 9.000 S NV 6. Add the death and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Programy or housing subsidies. Specify:  8. B. Social Security 8. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Programy or housing subsidies. Specify:  8. P. Social Security 8. Other government assistance that you regularly receive line (in the supplemental Nutrifion Assistance Programy or housing subsid   | 5. <b>Lis</b>    | st all payroll deductions:   |        |      |                 |       |                |      |      |  |
| 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. S 0.000 S NV 5d. Required repayments of retirement fund loans 5e. Insurance 5f. Domestic support obligations 5f. S 0.000 S NV 5g. Union dues 5f. Domestic support obligations 5f. S 0.000 S NV 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. S 985.00 S NV 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. S 3,345.00 S NV 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. S 3,345.00 S NV 8a. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrifion Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. S 0.000 S NV 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. S 0.000 S NV 11. +\$ 10. Calculate monthly income. Add lines 7+ line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available   | 5a               | . Tax, Medicare, and Social Security deductions  | 5a.    | \$   | 985             | 5.00  | \$             |      | N/A  |  |
| 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N.V. 5e. Insurance 5f. Domestic support obligations 5f. \$ 0.00 \$ N.V. 5g. Union dues 5g. \$ 0.00 \$ N.V. 5g. Union due due dilimenty, spousal support, child support, maintenance, divorce settlement, and property settlement. 5g. \$ 0.00 \$ N.V. 5g. Pension or retirement function due assistance that you receive, such as food stamps (cherifits under the Supplemental Nutrition Assistance Program) or housing subsidies. 5g. \$ 0.00 \$ N.V. 5g. Pension or retirement income 5g. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 5g. \$ 0.00 \$ N.V. 5g. Pension or retirement income 5g. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 5g. Specify: 5g. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 5g. Specify: 5g. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 5g. Specify: 5g. Committed amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 5g. Committed amount in the last                                    | 5b               |  | 5b.    | \$   |                 |       |                |      | N/A  | _  |
| 5e. Insurance 5f. Domestic support obligations 5f. S 0.000 \$ N.V. 5g. Union dues 5g. S 0.000 \$ N.V. 5 | 5c               | Voluntary contributions for retirement plans   | 5c.    | \$   | (               | 0.00  | \$             |      | N/A  |  |
| 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. Sh.+ \$ 0.00 \$ N/ 5h. 5h. Sh. 5h. Sh.+ \$ 0.00 \$ N/ 5h. 5h. Sh.   | 5d               | Required repayments of retirement fund loans   | 5d.    | \$   | (               | 0.00  | \$             |      | N/A  | <del>-</del>                                 |
| 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,345.00 \$ N/  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/ 8h. Other monthly income. Add line 7 + line 9.  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/ 8h. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$  | 5e               |  | 5e.    |      | (               | 0.00  | \$             |      | N/A  | <u> </u>                                     |
| 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 985.00 \$ N/V  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 3,345.00 \$ N/V  8. List all other income regularly received:  8a. Net income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/V  8e. Social Security  8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/V  8h. Other monthly income. Specify:  8h. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/V  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  10. Calculate monthly income and unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies   |                  |  |        | ٠.   |                 |       | \$             |      | N/A  | _  |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 985.00 \$ N/.  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,345.00 \$ N/.  8. List all other income regularly received: 8a. Not income from ental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/.  8d. Unemployment compensation 8d. \$ 0.00 \$ N/.  8e. Social Security 8e. \$ 0.00 \$ N/.  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/.  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in line   |                  |  |        |      |                 |       | \$             |      | N/A  | _  |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,345.00 \$ N/  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/  8g. Pension or retirement income  8g. \$ 0.00 \$ N/  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/  8h. Other monthly income. Add line 7 + line 9.  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roo   |                  |  | _      | ٠.   |                 |       | · <del>-</del> |      | N/A  | =  |
| 8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ N/. 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/. 8g. Pension or retirement income  8h. Other monthly income. Specify:  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/.  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$   |                  |  | 6.     | Τ.   |                 |       | · —            |      | N/A  | _  |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation 8d. \$ 0.00 \$ N/.  8e. Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. + \$ 0.00 \$ N/.  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/.  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ _ Normal  | 7. <b>C</b> a    | Iculate total monthly take-home pay. Subtract line 6 from line 4.  | 7.     | \$   | 3,345           | 5.00  | \$             |      | N/A  | _  |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/ 8d. Unemployment compensation 8d. \$ 0.00 \$ N/ 8e. Social Security 8e. \$ 0.00 \$ N/ 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8g. \$ 0.00 \$ N/ 8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/ 8h. Other monthly income. Add line 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$   |                  | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total |        |      |                 |       |                |      |      |  |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/  8h. Other monthly income. Specify:  8h. + \$ 0.00 \$ N/  9. Add all other income. Add line 8 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  | 01               | ·  |        | ٠.   |                 |       |                |      | N/A  |  |
| regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income 8g. \$ 0.00 \$ N/  8h. Other monthly income. Specify:  8h. + \$ 0.00 \$ N/  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies   |                  |  | 80.    | ۵.   | (               | 0.00  | \$             |      | N/A  | · <u> </u>                                   |
| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income 8g. \$ 0.00 \$ N/ 8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/ 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies   | OC.              | regularly receive Include alimony, spousal support, child support, maintenance, divorce  | 8c.    | \$   | (               | 0.00  | \$             |      | N/A  |  |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  | 8d               | . Unemployment compensation  | 8d.    | \$   | (               | 0.00  | \$             |      | N/A  | _  |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/ 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/ 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/ 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  | 8e               | •  | 8e.    | \$   | (               | 0.00  | \$             |      | N/A  | <u> </u>                                     |
| 8h. Other monthly income. Specify:  8h. + \$ 0.00 + \$ N/  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies   | 8f.              | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.               |        | \$   | (               | 0.00  | \$             |      | N/A  |  |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  | 8g               | Pension or retirement income   | _      | ٠.   |                 |       | *              |      | N/A  | _  |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  | 8h               | Other monthly income. Specify:   | _ 8h   | + \$ | (               | 0.00  | + \$           |      | N/A  | <u>.                                    </u> |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Comments   | 9. <b>A</b> d    | dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.     | \$_  | (               | 0.00  | \$             |      | N/   | A  |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Comments   | 10. <b>C</b> a   | alculate monthly income. Add line 7 + line 9.  | 10. \$ |      | 3 345 00        | + \$  |                | N/A  | = \$ | 3,345.00                                     |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i> , if it applies  Combined from the summary of the summary   |                  |  | Ľ      |      | 0,010100        |       |                | ,, . |      | 0,0 .0.00                                    |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12.   Commont  | Inc<br>oth<br>Do | clude contributions from an unmarried partner, members of your household, your other friends or relatives.  To not include any amounts already included in lines 2-10 or amounts that are not a                      | deper  |      |                 |       | •              |      |      | 0.00   |
| mont   | Wı               | rite that amount on the Summary of Schedules and Statistical Summary of Certain  |        |      |                 |       |                |      | \$   | 3,345.00                                     |
| <ul> <li>13. Do you expect an increase or decrease within the year after you file this form?</li> <li>■ No.</li> <li>☐ Yes. Explain:</li> </ul>  | 13. <b>D</b> c   |  | ?      |      |                 |       |                |      |      | ly income                                    |

Schedule I: Your Income

page 2

Official Form 106I

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| Fill | in this informa                                | tion to identify yo                    | ılır cas <del>o.</del> |   |  | ĺ                |                   |                           |
|------|--|--|------------------------|---|--|------------------|-------------------|---------------------------|
| Deb  |  | Eva Magnows                            |                        |   |  | Check            | if this is:       |                           |
| Deh  | tor 2  |  | <u> </u>               |   |  | □ A              | an amended filing | ving postpetition chapter |
|      | ouse, if filing)                               |  |                        |   |  |                  |                   | the following date:       |
| Unit | ed States Bankr                                | ruptcy Court for the:                  | NORTH                  | ERN DISTRICT OF ILLIN   | OIS                                      | N                | MM / DD / YYYY    |                           |
|      | e number<br>nown)                              |  |                        |   |  |                  |                   |                           |
| Of   | fficial Fo                                     | rm 106J                                |                        |   |  |                  |                   |                           |
|      |  | J: Your I                              | Exper                  | nses  |  |                  |                   | 12/15                     |
| Be a | as complete a                                  | and accurate as                        | possible<br>eded, atta | . If two married people ar  |  |                  |                   |                           |
| Pari | t 1: Descr                                     | ibe Your House                         | hold                   |   |  |                  |                   |                           |
| 1.   | No. Go to                                      |  |                        |   |  |                  |                   |                           |
|      |  | s Debtor 2 live i                      | n a separ              | ate household?  |  |                  |                   |                           |
|      |  |  | t file Offici          | al Form 106J-2, <i>Expense</i> s  | for Sanarata House                       | shold of Debto   | ar 2              |                           |
| 2.   |  | es. Debiol 2 mas<br>e dependents?      | _                      | ai Foiiii 1005-2, <i>Expenses</i>   | Tor Separate House                       | eriola di Debio  | л 2.              |                           |
| ۷.   | Do not list D                                  | •                                      | □ No ■ Yes.            | Fill out this information for   | Dependent's relati<br>Debtor 1 or Debtor |                  | Dependent's       | Does dependent            |
|      | Debtor 2.                                      |  |                        |   |  | 2                | age               | live with you?            |
|      | Do not state dependents                        |  |                        |   | Child                                    |                  | 19                | ■ Yes                     |
|      |  |  |                        |   |  |                  |                   | □ No                      |
|      |  |  |                        |   |  |                  |                   | ☐ Yes<br>☐ No             |
|      |  |  |                        |   |  |                  |                   | ☐ Yes                     |
|      |  |  |                        |   |  |                  |                   | □ No                      |
| 3.   | Do your ove                                    | enses include                          | _                      |   |  |                  |                   | ☐ Yes                     |
| J.   | expenses of                                    | f people other the<br>d your depender  | nan ┌                  | No<br>Yes   |  |                  |                   |                           |
| exp  | imate your ex                                  |  | our bankr              | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp |  |                  |                   |                           |
| the  | ude expense<br>value of sucl<br>ficial Form 10 | h assistance and                       | non-cash<br>d have ind | government assistance i<br>cluded it on <i>Schedule I:</i> Y              | f you know<br>our Income                 |                  | Your expo         | enses                     |
| 4.   |  | or home owners<br>and any rent for the |                        | ses for your residence. In  | nclude first mortgage                    | e<br>4. \$       |                   | 1,750.00                  |
|      | If not includ                                  | led in line 4:                         |                        |   |  |                  |                   |                           |
|      | 4a. Real e                                     | estate taxes                           |                        |   |  | 4a. \$           |                   | 0.00                      |
|      | •  | rty, homeowner's                       |                        |   |  | 4b. \$           |                   | 0.00                      |
|      |  | maintenance, re<br>owner's associati   |                        | upkeep expenses   |  | 4c. \$<br>4d. \$ |                   | 300.00                    |
| 5.   |  |  |                        | our residence, such as ho   | me equity loans                          | 4u. \$<br>5. \$  |                   | 0.00                      |

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### Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Desc Main Document Page 31 of 53

| Fill in this infor  | rmation to identify your  | case:                   |                              |   |  |
|---------------------|---------------------------|-------------------------|------------------------------|---|--|
| Debtor 1            | Eva Magnowski             | ouse.                   |                              |   |  |
| Debtor 1            | First Name                | Middle Name             | Last Name                    |   |  |
| Debtor 2            |                           |                         |                              |   |  |
| (Spouse if, filing) | First Name                | Middle Name             | Last Name                    |   |  |
| United States Ba    | ankruptcy Court for the:  | NORTHERN DISTRIC        | CT OF ILLINOIS               |   |  |
| Case number         |                           |                         |                              |   |  |
| (if known)          |                           |                         |                              |   | ☐ Check if this is an amended filing                               |
| Official Ford       |                           | an Individua            | ıl Debtor's Sc               | hedules                                 | 12/15  |
|                     | Í8 U.S.C. §§ 152, 1341, 1 |                         | .,.,                         | , | r imprisonment for up to 20  |
| Sig                 | ın Below                  |                         |                              |   |  |
| Did you pa          | ay or agree to pay some   | eone who is NOT an att  | orney to help you fill out b | pankruptcy forms?                       |  |
| ■ No                |                           |                         |                              |   |  |
| ☐ Yes.              | Name of person            |                         |                              |   | tcy Petition Preparer's Notice,<br>d Signature (Official Form 119) |
|                     |                           | that I have read the su | mmary and schedules file     | ed with this declaration a              | nd   |
| that they ar        | re true and correct.      |                         |                              |   |  |
| X /s/ Eva           | a Magnowski               |                         | Χ                            |   |  |
|                     | agnowski                  |                         |                              |   |  |
| Signati             | ure of Debtor 1           |                         | Signature of                 | Debtor 2                                |  |

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| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  |        |                   |                           |                                 |                                |                                 |                       |
|--|--------|-------------------|---------------------------|---------------------------------|--------------------------------|---------------------------------|-----------------------|
| Debtor 2   First Name   Middle Name   Last Name  | Fill   | in this inforn    | nation to identify you    | r case:                         |                                |                                 |                       |
| Debtor 2   Given to History   First Name   Middle Name   Last Name   | Deb    | otor 1            |                           | Middle Nove                     | Loot Name                      |                                 |                       |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS  Case number (thrower)  Case number of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (fl known). Answer every question.  Part I: Give Details About Your Marital Status and Where You Lived Before  What is your current marital status?  Married  Not married  Debtor 1 Prior Address:  Dates Debtor 1  Debtor 1 Prior Address:  Dates Debtor 1  No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2  Explain the Sources of Your Income  1. Old you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income your received from all jobs and all businesses, including part-time activities:  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  Debtor 1  Sources of income Check all that apply.  Levels that apply.  Debtor 2  Sources of income Check all that apply.  Debtor 1  Sources of income Check all that apply.  Debtor 1  Sources of income Check all that apply.  Debtor 4  Sources of income Check all that apply.  Debtor 4  Sources of income Check all that apply.  Debtor 6  Sources of income Check all that apply.  Debtor 1  Sources of income Check all that apply.  Debtor 3  Sources of income Check all that apply.  Debtor 4  Sources of income Check all that apply.  Debtor 5  Sources of income Check all that apply.  Debtor 9  Sources of income Check all t | Deb    | otor 2            | First Name                | Middle Name                     | Last Name                      |                                 |                       |
| Case number   Check if this is an amended filing   Check if this is an amended filing    Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy   4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?    Married   |        |                   | First Name                | Middle Name                     | Last Name                      |                                 |                       |
| Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If wo married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married Not married Not married  2. During the last 3 years, have you lived in the last 3 years. Do not include where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Dived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of Income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  Debtor 1 Sources of income Check all that apply. Check all that apply. Check all that apply. Check all that apply. From January 1 of current year until the date you filed for bankruptcy:  Nonuses, tips  Debtor 2 Sources of income Check all that apply. Sources of income Check all | Uni    | ted States Ba     | nkruptcy Court for the:   | NORTHERN DISTRICT               | OF ILLINOIS                    |                                 |                       |
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| Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?    Married  | (if kn | own)              |                           |                                 |                                | _                               |                       |
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| Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?    Married  | Sta    | atement           | of Financial              | Attairs for Individ             | duals Filing for B             | ankruptcy                       | 4/16                  |
| Married   Not    |        |                   |                           |                                 |                                |                                 |                       |
| Married Not married During the last 3 years, have you lived anywhere other than where you live now?    No  |        |                   |                           |                                 |                                | , adamena pages, mile je a      |                       |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Prior Address: Dates Debtor 2 Dived there  Butten Debtor 2 Prior Address: Dates Debtor 2 Dived there  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Debtor 8 Debtor 9 D | Par    | t 1: Give D       | etails About Your Ma      | rital Status and Where You      | ı Lived Before                 |                                 |                       |
| Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Prior Address: Dates Debtor 2 Dived there  Butten Debtor 2 Prior Address: Dates Debtor 2 Dived there  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Debtor 8 Debtor 9 D | 1      | What is you       | current marital statu     | ıs?                             |                                |                                 |                       |
| During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   Ilved there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  | ••     | Wilat is you      | current maritar state     |                                 |                                |                                 |                       |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Buttined there 1 lived there  Buttined there 2 lived there  Buttined there 2 lived there  Buttined there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  (before deductions and exclusions)  Power of income Check all that apply.  (before deductions and exclusions)  Wages, commissions, bonuses, tips   |        | _                 | ried                      |                                 |                                |                                 |                       |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there  Buttined there 1 lived there  Buttined there 2 lived there  Buttined there 2 lived there  Buttined there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  (before deductions and exclusions)  Power of income Check all that apply.  (before deductions and exclusions)  Wages, commissions, bonuses, tips   | 2.     | During the la     | ast 3 years, have you     | lived anywhere other than       | where you live now?            |                                 |                       |
| Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   Debtor 2   Debtor 2 Prior Address: Dates Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 2   Debtor 3   Debtor 4   Debtor 4   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 7   Debtor 7   Debtor 8   Debtor 9   Debtor 8   Debtor 9   Debtor |        | _                 |                           | ·                               | ·                              |                                 |                       |
| Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   Debtor 3   Debtor 4   Debtor 2   Debtor 4   Debtor 5   Debtor 5   Debtor 6   Debtor 6   Debtor 7   Debtor 6   Debtor 7   Debtor 7   Debtor 8   Debtor 9   Debto |        | _                 | t all of the places you l | ived in the last 2 years. Do n  | ot include where you live now  | ,                               |                       |
| lived there   lived there   lived there   lived there  |        |                   | , ,                       | ŕ                               | ŕ                              |                                 |                       |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  |        | Debtor 1 Pr       | ior Address:              |                                 | Debtor 2 Prior Ac              | ldress:                         |                       |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  | 3.     | Within the la     | ıst 8 vears. did vou ev   | ver live with a spouse or le    | gal equivalent in a commun     | ity property state or territory | ? (Community property |
| Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$30,310.00   Wages, commissions, bonuses, tips   | state  |                   |                           |                                 |                                |                                 |                       |
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| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  |        | _                 | ke sure you fill out Scl  | nedule H: Your Codebtors (O     | fficial Form 106H).            |                                 |                       |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips  |        |                   |                           |                                 |                                |                                 |                       |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Sources of income (before deductions and exclusions)  \$30,310.00  Wages, commissions, bonuses, tips  | Par    | t 2 Explai        | n the Sources of You      | r Income                        |                                |                                 |                       |
| Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$30,310.00  Wages, commissions, bonuses, tips  \$30,310.00  | 4.     | Fill in the total | l amount of income yo     | u received from all jobs and    | all businesses, including part | -time activities.               | dar years?            |
| Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$30,310.00  Wages, commissions, bonuses, tips  \$30,310.00  |        | П Мо              |                           |                                 |                                |                                 |                       |
| Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Sources of income (before deductions and exclusions)  Under the date you filed for bankruptcy:   |        |                   | in the details.           |                                 |                                |                                 |                       |
| Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Sources of income (before deductions and exclusions)  Under the date you filed for bankruptcy:   |        |                   |                           | Dalifar 4                       |                                | Dalifario                       |                       |
| Check all that apply.  Sand exclusions  The date you filed for bankruptcy:  Sand exclusions  Sand exclusions  Sand exclusions  Sand exclusions  Check all that apply.  Check all that apply.  Check all that apply.  Check all that apply.  Sand exclusions  Sand exclusions  Sand exclusions  Check all that apply.  Sand exclusions   |        |                   |                           |                                 | Grass income                   |                                 | Grace income          |
| the date you filed for bankruptcy:  wages, commissions, bonuses, tips  bonuses, tips   |        |                   |                           |                                 | (before deductions and         |                                 | (before deductions    |
|  |        |                   |                           | •                               | \$30,310.00                    | _                               |                       |
|  |        |                   |                           | • •                             |                                | ☐ Operating a business          |                       |

Official Form 107

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Case number (if known) Document

Debtor 1 Eva Magnowski

|     |   |                                      |   | Debtor 1  |   |  | Debtor 2   |                                      |   |
|-----|---|--------------------------------------|---|---|---|--|--|--------------------------------------|---|
|     |   |                                      |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions a<br>exclusions)                                   | and  | Sources of inconcern Check all that a                      |                                      | Gross income<br>(before deductions<br>and exclusions) |
|     | For last calendar year:<br>(January 1 to December 31, 2015) |                                      | 31, 2015 )  | ■ Wages, commissions, bonuses, tips   | \$63,896  | 6.00   | ☐ Wages, com bonuses, tips                                 | missions,                            |   |
|     |   |                                      |   | Operating a business  |   |  | Operating a  | business                             |   |
|     |   | dar year bet<br>December 3           |   | ■ Wages, commissions, bonuses, tips   | \$64,000  | 0.00   | ☐ Wages, com bonuses, tips                                 | missions,                            |   |
|     |   |                                      |   | Operating a business  |   |  | Operating a  | business                             |   |
|     | and other winnings.  List each s                            | public benef<br>If you are fili      | it payments;<br>ng a joint cas<br>he gross inco   | ner that income is taxable. Exa<br>pensions; rental income; inter<br>se and you have income that y<br>ome from each source separa   | est; dividends; money<br>rou received together,                                       | collecte<br>list it on   | ed from lawsuits;<br>aly once under De                     | royalties; an<br>ebtor 1.            |   |
|     |   |                                      |   |   |   |  |  |                                      |   |
|     |   |                                      |   | Debtor 1 Sources of income Describe below.  | Gross income from each source (before deductions exclusions)                          |  | Debtor 2<br>Sources of inc<br>Describe below.              |                                      | Gross income<br>(before deductions<br>and exclusions) |
| Par | t 3: List   | Certain Pa                           | yments You  | Made Before You Filed for   | Bankruptcy  |  |  |                                      |   |
| 6.  | Are either ☐ No.  | Neither De individual puring the No. | ebtor 1 nor I<br>orimarily for a<br>90 days befo<br>Go to line 7<br>List below o<br>paid that cr<br>not include | 's debts primarily consumer Debtor 2 has primarily consumer personal, family, or household pre you filed for bankruptcy, direction of the creditor to whom you paieditor. Do not include payment payments to an attorney for the ton 4/01/19 and every 3 years. | d purpose."  d you pay any creditor  d a total of \$6,425* or uts for domestic suppor | a total of the state of the sta | of \$6,425* or mor<br>one or more pay<br>tions, such as ch | re?<br>ments and tl<br>ild support a | he total amount you<br>ind alimony. Also, do          |
|     | ■ Yes.  |                                      |   | or both have primarily consure you filed for bankruptcy, di   |   | a total  | of \$600 or more?  |                                      |   |
|     |   | ■ No. □ Yes                          | include pay   | r.<br>each creditor to whom you pai<br>rments for domestic support o<br>this bankruptcy case.   |   |  |  |                                      |   |
|     | Creditor'   | s Name and                           | l Address   | Dates of payme  |   | ınt<br>ıid   | Amount you still owe                                       | Was this p                           | payment for   |

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Case number (if known) Debtor 1 Eva Magnowski

| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|-----|--|---------------------------------------|-------------------|----------------------|------------------------------|------------------------------|--|--|--|--|--|--|
|     | Yes. List all payments to an insider.  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment                      | Total amount paid | Amount you still owe | Reason for                   | this payment                 |  |  |  |  |  |  |
| 8.  | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | <ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment                      | Total amount paid | Amount you still owe | Reason for<br>Include cred   | this payment<br>litor's name |  |  |  |  |  |  |
| Par | t 4: Identify Legal Actions, Repossession  | ns, and Foreclosures                  |                   |                      |                              |                              |  |  |  |  |  |  |
| 9.  | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | Case title Case number   | Nature of the case                    | Court or agency   |                      | Status of th                 | e case                       |  |  |  |  |  |  |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | Creditor Name and Address  | Describe the Property                 |                   |                      |                              | Value of the property        |  |  |  |  |  |  |
|     |  | Explain what happened                 |                   |                      |                              |                              |  |  |  |  |  |  |
| 11. | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.   |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | Creditor Name and Address  | Describe the action the creditor took |                   |                      | Date action was Amount taken |                              |  |  |  |  |  |  |
| 12. | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No  Yes  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
| Pai | t 5: List Certain Gifts and Contributions  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |
|     | ☐ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  | Describe the gifts                    |                   | Dates<br>the g       | s you gave<br>ifts           | Value                        |  |  |  |  |  |  |
|     | Person to Whom You Gave the Gift and Address:  |                                       |                   |                      |                              |                              |  |  |  |  |  |  |

Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Page 35 of 53 Case number (if known) Document Debtor 1 Eva Magnowski 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

**Person Who Received Transfer** Address

Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Nο

Yes. Fill in the details. П

Name of trust

Description and value of the property transferred

**Date Transfer was** made

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Debtor 1 Eva Magnowski

|     | t 8: List of Certain Financial Accounts, Instru  | •  | ·             | •                       |   | ur hanafit alasad             |  |  |  |  |  |
|-----|--|--|---------------|-------------------------|---|-------------------------------|--|--|--|--|--|
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. |  |               |                         |   |                               |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |               |                         |   |                               |  |  |  |  |  |
|     |  | ast 4 digits of Type of accord   |               | unt or Date account was |   | Last balance                  |  |  |  |  |  |
|     | Address (Number, Street, City, State and ZIP Code)   | ccount number i  | nstrument     |                         | closed, sold,<br>moved, or<br>transferred | before closing or<br>transfer |  |  |  |  |  |
| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?   |  |               |                         |   |                               |  |  |  |  |  |
|     | ■ No   |  |               |                         |   |                               |  |  |  |  |  |
|     | Yes. Fill in the details.  |  |               |                         |   |                               |  |  |  |  |  |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)   | Who else had access to it? Address (Number, Street, City, State and ZIP Code)        |               | Describe                | the contents                              | Do you still have it?         |  |  |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  |  |               |                         |   |                               |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |               |                         |   |                               |  |  |  |  |  |
|     | Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code)   | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) |               | Describe                | the contents                              | Do you still have it?         |  |  |  |  |  |
| Par | t 9: Identify Property You Hold or Control for   | ,  |               |                         |   |                               |  |  |  |  |  |
| 23. | Do you hold or control any property that some for someone.   | one else owns? Includ  | e any propert | ty you borr             | owed from, are storing fo                 | or, or hold in trust          |  |  |  |  |  |
|     | ■ No   |  |               |                         |   |                               |  |  |  |  |  |
|     | Yes. Fill in the details.  |  |               |                         |   |                               |  |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)   | Where is the proper<br>(Number, Street, City, Stat<br>Code)                          |               | Describe                | the property                              | Value                         |  |  |  |  |  |
| Par | t 10: Give Details About Environmental Inform  | nation   |               |                         |   |                               |  |  |  |  |  |
| For | the purpose of Part 10, the following definitions  | s apply:   |               |                         |   |                               |  |  |  |  |  |
|     | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.  |  |               |                         |   |                               |  |  |  |  |  |
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.   |  |               |                         |   |                               |  |  |  |  |  |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.  |  |               |                         |   |                               |  |  |  |  |  |
| Rep | ort all notices, releases, and proceedings that y  | ou know about, regard  | lless of when | they occu               | rred.                                     |                               |  |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |  |               |                         |   |                               |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.   |  |               |                         |   |                               |  |  |  |  |  |
|     | Name of site   | Governmental unit  |               | Enviro                  | onmental law, if you                      | Date of notice                |  |  |  |  |  |

Address (Number, Street, City, State and

ZIP Code)

know it

Address (Number, Street, City, State and ZIP Code)

Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Page 37 of 53 Document Debtor 1 Eva Magnowski ase number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Eva Magnowski Signature of Debtor 2 Eva Magnowski Signature of Debtor 1 Date August 4, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No
☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Document

Debtor 1 Eva Magnowski

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| Fill in this infor              | mation to identify your  | case:   |             |          |                 |
|---------------------------------|--------------------------|---|-------------|----------|-----------------|
| Debtor 1                        | Eva Magnowski            |   |             |          |                 |
| Dobtor 2                        | First Name               | Middle Name   | Last Name   |          |                 |
| Debtor 2<br>(Spouse if, filing) | First Name               | Middle Name   | Last Name   |          |                 |
| United States Ba                | ankruptcy Court for the: | NORTHERN DISTRICT   | OF ILLINOIS |          |                 |
| Case number                     |                          |   |             |          |                 |
| (if known)                      |                          |   |             |          | t if this is an |
|                                 |                          |   |             | ameno    | ded filing      |
| Official Fo                     | orm 108                  |   |             |          |                 |
|                                 | 1111 100                 |   |             | <b>-</b> |                 |
|                                 | nt of Intentio           | C I - |             |          |                 |

you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?    | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | ☐ Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property securing debt:                                   | ☐ Retain the property and [explain]:                               |   |
| securing debt.  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.      | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                               |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Eva Magnowski     |   | Case number (if known)   |                                 |  |
|----------------------------|---|--|---------------------------------|--|
| name:                      |   | <ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>  | ☐ Yes                           |  |
| Descrip                    |   | Reaffirmation Agreement.   |                                 |  |
| property<br>securing debt: |   | ☐ Retain the property and [explain]:   | _                               |  |
| For any un                 | rmation below. Do not list real estat   | erty Leases<br>at you listed in Schedule G: Executory Contracts and Unexpire<br>te leases. Unexpired leases are leases that are still in effect; the<br>perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)( | lease period has not yet ended. |  |
| Describe                   | your unexpired personal property le   | eases  | Will the lease be assumed?      |  |
| Lessor's n                 | ame:  |  | □ No                            |  |
| Descriptio<br>Property:    | n of leased   |  | ☐ Yes                           |  |
| Lessor's n                 | name:   |  | □ No                            |  |
| Descriptio<br>Property:    | n of leased   |  | □ Yes                           |  |
| Lessor's n                 | ame:  |  | □ No                            |  |
| Description Property:      | n of leased   |  | ☐ Yes                           |  |
| Lessor's n                 | ame:  |  | □ No                            |  |
| Descriptio<br>Property:    | n of leased   |  | ☐ Yes                           |  |
| Lessor's n                 | ame:  |  | □ No                            |  |
| Descriptio<br>Property:    | n of leased   |  | ☐ Yes                           |  |
| Lessor's n                 |   |  | □ No                            |  |
| Description Property:      | n of leased   |  | ☐ Yes                           |  |
| Lessor's n                 | name:<br>on of leased   |  | □ No                            |  |
| Property:                  |   |  | ☐ Yes                           |  |
| Part 3:                    | Sign Below  |  |                                 |  |
| Under pen<br>property th   | nalty of perjury, I declare that I have<br>hat is subject to an unexpired lease | indicated my intention about any property of my estate that see  | cures a debt and any personal   |  |
| <b>X</b> /s/ E             | va Magnowski  | x  |                                 |  |
|                            | Magnowski<br>ature of Debtor 1  | Signature of Debtor 2  |                                 |  |
| Date                       | August 4, 2016  | Date   |                                 |  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-25532 Doc 1 Filed 08/09/16 Entered 08/09/16 13:37:41 Desc Main Document Page 45 of 53

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court**Northern District of Illinois

| In re  | Eva Magnowski   |  | Case No.  |                           |              |
|--------|---|--|---|---------------------------|--------------|
|        |   | Debtor(s)  | Chapter   | 7                         |              |
|        | DISCLOSURE OF COMP  | PENSATION OF ATTOR   | NEY FOR D   | EBTOR(S)                  |              |
| С      | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 ompensation paid to me within one year before the fee rendered on behalf of the debtor(s) in contemplation   | filing of the petition in bankruptcy, o  | r agreed to be pai                                      | d to me, for services ren | ndered or to |
|        | For legal services, I have agreed to accept   |  | \$  | 1,500.00                  |              |
|        | Prior to the filing of this statement I have receive  | ed   | \$  | 750.00                    |              |
|        |   |  |   | 750.00                    |              |
| 2. Т   | The source of the compensation paid to me was:  |  |   |                           |              |
|        | ■ Debtor □ Other (specify):   |  |   |                           |              |
| 3. Т   | The source of compensation to be paid to me is:   |  |   |                           |              |
|        | ■ Debtor □ Other (specify):   |  |   |                           |              |
| 4. I   | I have not agreed to share the above-disclosed co   | ompensation with any other person u  | nless they are mer                                      | nbers and associates of   | my law firm. |
| I      | ☐ I have agreed to share the above-disclosed comport copy of the agreement, together with a list of the   |  |   |                           | w firm. A    |
| 5. 1   | n return for the above-disclosed fee, I have agreed to  | o render legal service for all aspects   | of the bankruptcy                                       | case, including:          |              |
| b<br>c | <ul> <li>Analysis of the debtor's financial situation, and re</li> <li>Preparation and filing of any petition, schedules, s</li> <li>Representation of the debtor at the meeting of cre</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reagreements and applications as needed of liens on household goods.</li> </ul> | statement of affairs and plan which reditors and confirmation hearing, and educe to market value; exemption  | may be required;<br>any adjourned he<br>planning; prepa | arings thereof;           | affirmation  |
| 5. E   | By agreement with the debtor(s), the above-disclosed Representation of the debtors in any dis adversary proceeding.   |  |   | ief from stay actions o   | or any other |
|        |   | CERTIFICATION  |   |                           |              |
|        | certify that the foregoing is a complete statement of ankruptcy proceeding.   | any agreement or arrangement for p   | payment to me for                                       | representation of the de  | btor(s) in   |
| Αι     | ugust 4, 2016   | /s/ Michael J. Worw  | ag  |                           |              |
|        | nte   | Michael J. Worwag<br>Signature of Attorney<br>Worwag & Malysz, I<br>The Peoples Advoc<br>2500 E. Devon Ave<br>Des Plaines, IL 600<br>847.954.2350 Fax: | P.C.<br>ates<br>#300<br>18<br>847.954.2755              |                           | _            |
|        |   | mjworwag@gmail.c   | om  |                           |              |

## WORWAG & MALYSZ, P.C.

adba The Peoples Advocates www.worwagmalyszlaw.com

2500 E. Devon Ave #300 Des Plaines, Illinois 60018 Phone: 847.533.3303 Email: mjworwag@gmail.com 10135 S. Roberts Rd. #205 Palos Hill, Illinois 60465 Phone: 773.586.4010 Fax:847.954.2755

### Retainer for Legal Services

# 1905

Chapter 7- Eliminates dischargeable unsecured debts. Certain debts may not be dischargeable.
+\$70.00 cc

Your fee for our services is \$\_/,500-\_. This is a "flat fee" of which half is for services rendered prior to your case being filed and the other half is for services rendered after your case is filed. Any portion of the retainer not earned will be refunded to you.

Today you paid \$\_\_\_\_\_.
You agree to pay the balance of \$\_\_\_\_\_ by the date of the trustee meeting.
Filing Fee- You will also provide a separate payment for \$335.00. The \$335 filing fee is a separate cost and is not included in the fee that you were quoted for our services and must be paid before we file.

This agreement will serve as an engagement agreement that will establish the terms of our relationship. When you sign it, it will become a contract between us. In passing the Bankruptcy Abuse Prevention and Consumer Protection Act of 2005, the Congress imposed strict requirements upon attorneys representing debtors, requiring them to specify what duties they will perform and to make certain representations to clients. Those specific duties and representations are set out in the representation agreement. Please read this agreement carefully and be sure you understand it. If you have any questions, you should consult with me before signing. Once you are satisfied with the agreement, please sign and return a copy to me. The following are the specifics of our proposed representation. We will:

- 1. Meet with you to discuss your financial situation and possible solutions;
- 2. Provide the section 342(b)(1) notice, which sets out the purpose, benefits, and costs of filing under Chapters 7, 11, 12 or 13; the types of services available from credit counseling agencies; and the penalties of committing certain bankruptcy crimes, and will explain the notice to you;
- 3. Prepare the necessary bankruptcy petition, schedules, statement of affairs, and other documents, and review and file the bankruptcy case under the chapter you select;
- 4. Prepare for and accompany you to the section 341 first meeting of creditors;
- 5. Assist in the amendments to the papers filed and the production of such documents as the trustee requests;
- 6. Assist you in the negotiation and execution of reaffirmation agreements that are in your best interest and meet all requirements of the law.

FULL DISCLOSURE- You agree that you will fully disclose all financial information. You agree to disclose ALL of your assets, debts and income and understand that it is a Federal crime to omit any other information from your bankruptcy petition punishable by fine of up to \$500,000 or imprisonment for up to 5 years or both. You also agree to provide our office with proof of your income for the last six months and your tax returns for the previous two (2) years.

→FINANACIAL MANANGEMENT AND CREDIT COUNSELING COURSES- Under the new law you are required to take a Credit Counseling Course prior to the filing of your bankruptcy petition and a Financial Management Course prior to the discharge of your bankruptcy for an

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# ADDITITONAL FEE (usually no more than \$100). If you fail to complete these courses your bankruptcy will be denied.

Attached are notices and information I am required to give you by law. Please read all information.

### **Debt Relief Agency Disclosures to an Assisted Person**

Section 527 of the Bankruptcy Code requires a Debt Relief Agency to provide an assisted person with the following:

- 1. A copy of the notice prepared by the clerk of the Bankruptcy Court, in accordance with the requirements of § 342(b), which is attached hereto and which contains:
  - (1) a brief description of
    - (A) Chapters 7, 11, 12, and 13 and the general purpose, benefits, and costs of proceeding under each of those chapters; and
    - (B) the types of services available from credit counseling agencies; and
  - (2) statements specifying that
    - (A) a person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury in connection with a case under this title shall be subject to fine, imprisonment, or both; and
    - (B) all information supplied by a debtor in connection with a case under this title is subject to examination by the Attorney General.
- 2. The following disclosures are required by § 527(a)(2), which advises an assisted person that:
  - (A) all information that the assisted person is required to provide with a petition and thereafter during a case under this title is required to be complete, accurate, and truthful;
  - (B) all assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in § 506 must be stated in those documents where requested after reasonable inquiry to establish such value;
  - (C) current monthly income, the amounts specified in section 707(b)(2), and, in a case under Chapter 13 of this title, disposable income (determined in accordance with § 707(b)(2)) are required to be stated after reasonable inquiry; and
  - (D) information that an assisted person provides during his or her case may be audited pursuant to this title, and failure to provide such information may result in dismissal of the case under this title or other sanction, including a criminal sanction.

If you have any questions about any of these disclosures, we will be happy to provide further explanation.

We also call your attention to Exhibits A and B attached to the Representation and made a part thereof.

#### **EXHIBIT A**

### Separate Disclosure Required by Section 527 of the Bankruptcy Code as Amended

### IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY

(Note: This form is mandated by statute. It may or may not correctly explain the law.)

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. The law requires an attorney or bankruptcy petition preparer to give you a written contract specifying what the attorney or bankruptcy petition preparer will do for you and how much it will cost. Ask to see the contract before you hire anyone.

The following information explains what must be done in a routine bankruptcy case to help you evaluate how much service you need. Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and decide which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents (Petition, Schedules, Statement of Financial Affairs, and in some cases a Statement of Intention) must be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you must attend the required first meeting of creditors, where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a Chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a Chapter 13 case, in which you repay your creditors what you can afford over 3 to 5 years, you may also want help preparing your Chapter 13 plan and with the confirmation hearing on your plan, which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than Chapter 7 or Chapter 13, you should consult someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only lawyers, not bankruptcy petition preparers, can give you legal advice.

Client hereby acknowledges receipt of a copy of this disclosure.

#### EXHIBIT B

# Information to the Assisted Person (Debtor) on How to Provide All Information Required by Section 521

Section 521 of the Code sets out the Debtor's duties related to the filing of a bankruptcy case. A copy of the section is attached to this writing.

As you fill out these schedules and statement of affairs, you should keep the following in mind:

- 1. Completing the income and expense pages accurately and completely is critical.
  - (a) To compile your income, refer to recent pay stubs and last year's income tax returns. Accounting for overtime, investment dividends, and other earnings is necessary.
  - (b) People usually pay cash for many items, such as groceries. Review your monthly expense payments and make a best estimate on cash expenditures. If you pay insurance annually, calculate the monthly cost. Attached are IRS expense allowances for the area in which you live. If your expenses exceed these, we will have to review them and perhaps make adjustments.
  - (c) When you value property you own, consider prices in the neighborhood for housing, in newspapers and car lots for automobiles, and what you would pay for furniture and clothes at a business selling such goods.
  - (d) If you have an item of special value, an appraisal may be necessary.
  - (e) When listing creditors, collect current bills and use that information for mailing addresses and balances due.
  - (f) Under the law of this state, or federal bankruptcy law, certain property may be exempt and may be retained. Attached is a copy of the state list of exemptions and also a list of property that may be exempt under federal law. Neither list is all-inclusive. If a seller has a lien on exempt property, the lien may be avoidable or you may have to pay for the property in order to keep it. After you have prepared these lists, we can review them and decide what property qualifies as exempt.

ADDITIONAL FEES- The *only* reason that you may be charged additional fees is a) *Failing to list debts* at time of filing that later have to be added to your bankruptcy documents. There is a \$100 charge to amend your petition, b) *Missing court date*. You must attend a meeting of creditors approximately 4 - 6 weeks after your case is filed. I still have to appear if you cannot, so there will be a \$150 additional fee for a missed court date. c) *Adversary objections* to discharge debts based on fraudulent use of credit cards or other dischargeability issues. Fee for litigating a dischargeability issue is \$200 per hour, five hours to be paid in advance if we decide to represent you. d) *Lien avoidance*. You agree that the above quoted fee does not include services provided to avoid judgment liens (\$200 per hour) and non-purchase money security interests (\$200 per hour). You understand and agree that if you do not pay the fee, I will not bring the motion and the lien will survive the bankruptcy. **Reaffirmations**- Once you reaffim a debt, you may only rescind the reaffirmation agreement by contacting our office no less than two weeks prior

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to the bar date for rescissions. You may only reaffirm a debt if it does not impose an undue hardship to you.

| Secured Debts   | Unsecure             | d Debts     | ·<br>         | Non-Dischargeable                      |
|---|----------------------|-------------|---------------|--|
| Mortgage Arrears  |                      |             |               | _ Tax                                  |
| Mortgage Balance  |                      |             |               | Student Loans                          |
| Car Balance-  |                      |             |               | Gov't Fines                            |
| Loans   |                      |             |               | Misc                                   |
| Total Secured \$  |                      |             |               |  |
| What you must provide befo  | re I file your ca    | ase: (I ca  | ınnot file    | without this information!)             |
| Your state and federal incor  | me tax returns for t | he prior 2  | years and W   | 72 Stubs.                              |
| <ul> <li>Your most recent pay stubs<br/>from all sources</li> </ul>   | from all employers   | s, and reco | rds concerni  | ng your earnings for the past 6 months |
| All bills from all creditors for                                      | the past 90 days     | so that we  | may determ    | ine the proper place to send notice.   |
| All loan documents for all se   | ecured loans, includ | ling home   | loans and au  | ito loans                              |
| <ul> <li>Your social security card</li> </ul>                         |                      |             |               |  |
| <ul> <li>Your photo identification car</li> </ul>                     | <sup>-</sup> d       |             |               |  |
| • List of your household incom  | ne and expenses      |             |               |  |
| <ul> <li>Details concerning every ite</li> </ul>                      | m of property you    | own, inclu  | ding real est | ate and personal property              |
| <ul> <li>Details concerning any litigate</li> </ul>                   | ition in which you i | nvolved no  | w or in whic  | h you may be involved in the future.   |
| <ul> <li>Information on any inherital may be a beneficiary</li> </ul> | nce you may have     | received, e | expect to rec | eive or trust as to which you are or   |
| <ul> <li>Information on all insurance</li> </ul>                      | policies             |             |               |  |
| Credit Counseling Cer   | tificate             |             |               |  |
| I hereby acknowledge that I/We agreement and I/we understan           | d all of its conte   | ents.       | ed this 5 p   | age retainer/representation            |
| x an hugost R.  | 1-2016               | Х           |               |  |
| X Quy Vyfish 8-<br>Client Date  | ,                    | (           | Client        | Date                                   |

Atterney on behalf of Worwag & Malysz, PC

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### United States Bankruptcy Court Northern District of Illinois

| In re | Eva Magnowski                                |   | Case No.               |                      |
|-------|--|---|------------------------|----------------------|
|       |  | Debtor(s)   | Chapter 7              |                      |
|       | VER  | RIFICATION OF CREDITOR MA                           | ATRIX                  |                      |
|       |  | Number of C   | Creditors:             | 12                   |
|       | The above-named Debtor(s) h (our) knowledge. | hereby verifies that the list of credito            | ers is true and correc | et to the best of my |
| Date: | August 4, 2016                               | /s/ Eva Magnowski Eva Magnowski Signature of Debtor |                        |                      |

Amex 9111 Duke Blvd Mason, OH 45040

Chase Card Po Box 15298 Wilmington, DE 19850

Citibank Po Box 6241 Sioux Falls, SD 57117

Commerce Bank Po Box 411036 Kansas City, MO 64141

Discover Financial Po Box 15316 Wilmington, DE 19850

Fed Loan Services Po Box 60610 Harrisburg, PA 17106

JPMorgan Chase Bank NA PO Box 29550 Phoenix, AZ 85038

Macy dsnb 9111 Duke Blvd Mason, OH 45040

Nordstrom 13531 E Caley Ave Englewood, CO 80111

Syncb/Gapdc Po Box 965005 Orlando, FL 32896

Syncb/Toysrusdc Po Box 965005 Orlando, FL 32896 Us Bank 4325 17th Ave S Fargo, ND 58125